

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: AR
APPLICATION YEAR: 2011

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FORM 2
MCH BUDGET DETAILS FOR FY 2011

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: AR

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

\$ 4,258,671 (60 %)

B.Children with special health care needs:

\$ 2,224,446 (31.34 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 614,668 (8.66 %)

(The above figure cannot be more than 10%) [Sec. 504(d)]

\$ 7,097,785

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 679,554

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 7,658,325

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 147,663

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 18,734,874

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 5,797,136

\$ 26,540,862

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 34,318,201

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 245,000

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 530,483

j. Education: \$ 0

k. Other: \$ 0

HRSA \$ 183,052

Title X \$ 3,904,621

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 4,963,156

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 39,281,357

FORM NOTES FOR FORM 2
None
FIELD LEVEL NOTES
None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: AR

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 7,483,501	\$ 7,182,207	\$ 7,191,246	\$ 7,277,379	\$ 7,191,246	\$ 6,455,686
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 1,071,978	\$ 0	\$ 854,898	\$ 140,483	\$ 863,937	\$ 982,274
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,003,381	\$ 8,079,781	\$ 7,790,017	\$ 4,321,591	\$ 8,079,781	\$ 5,109,818
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 94,297
6. Program Income <i>(Line6, Form 2)</i>	\$ 15,247,734	\$ 13,207,108	\$ 13,421,497	\$ 12,536,371	\$ 13,207,108	\$ 15,785,615
7. Subtotal	\$ 30,806,594	\$ 28,469,096	\$ 29,257,658	\$ 24,275,824	\$ 29,342,072	\$ 28,427,690
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 80,460,171	\$ 4,024,197	\$ 4,925,478	\$ 5,252,013	\$ 4,024,197	\$ 4,251,411
9. Total <i>(Line11, Form 2)</i>	\$ 111,266,765	\$ 32,493,293	\$ 34,183,136	\$ 29,527,837	\$ 33,366,269	\$ 32,679,101
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: AR

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$ 7,066,705	\$ 6,583,838	\$ 7,066,705		\$ 7,097,785	
2. Unobligated Balance (Line2, Form 2)	\$ 597,871	\$ 597,871	\$ 627,776		\$ 679,554	
3. State Funds (Line3, Form 2)	\$ 3,149,026	\$ 7,481,595	\$ 4,530,304		\$ 7,658,325	
4. Local MCH Funds (Line4, Form 2)	\$ 0	\$ 0	\$ 0		\$ 0	
5. Other Funds (Line5, Form 2)	\$ 0	\$ 95,600	\$ 118,969		\$ 147,663	
6. Program Income (Line6, Form 2)	\$ 13,052,724	\$ 16,950,605	\$ 16,037,409		\$ 18,734,874	
7. Subtotal	\$ 23,866,326	\$ 31,709,509	\$ 28,381,163	\$ 0	\$ 34,318,201	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds (Line10, Form 2)	\$ 5,252,013	\$ 4,917,629	\$ 4,539,857		\$ 4,963,156	
9. Total (Line11, Form 2)	\$ 29,118,339	\$ 36,627,138	\$ 32,921,020	\$ 0	\$ 39,281,357	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

- 1. Section Number:** Form3_Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2008
Field Note:
The majority of the funds budgeted, but not expended was in the CSHCN budget. The unobligated balance for federal fiscal year 2008 has been expended in federal fiscal year 2009.
- 2. Section Number:** Form3_Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2008
Field Note:
The unobligated balance was underestimated at the time the fy 2008 budget was submitted.
- 3. Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2009
Field Note:
New time allocation system allows us to capture a more accurate picture of effort and how much it is being paid for from all funding streams. Much more effort paid for with state funds has been identified, than had been in the past.
- 4. Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2008
Field Note:
There was further reduction if state general revenue for the Unwed Birth and Abstinence subgrants, aimed at reducing teen pregnancy. Coordinated School Health funds were listed under state funds previously and were not budgeted under other. Because these funds come from the Arkansas Dept. of Education and they are the pass through for the original source of the funds, (CDC) it was felt that they are better listed as Other Funds. CSHCN budget in state general revenue exceeded funding available, resulting in decreased spending of state funds.
- 5. Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2009
Field Note:
Funds from the Arkansas Department of Education to the Arkansas Dept. of Health to help support their portion of the Coordinated School Health Program were included this year. They had not been included previously.
- 6. Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2008
Field Note:
Coordinated School Health funds were listed under state funds previously and were not budgeted under other. Because these funds come from the Arkansas Dept. of Education and they are the pass through for the original source of the funds, (CDC) it was felt that they are better listed as Other Funds.
- 7. Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2009
Field Note:
The Family Planning and Maternity expenses exceeded expectations. The Arkansas Dept. of Health's new cost allocation system showed more effort going into some of the MCH programs than had previously been identified. Consequently salary and fringe was higher, to pay for that effort. Also the expanded Newborn Screening Program showed an increase in costs.
- 8. Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2008
Field Note:
Additional funds through increased fees were obtained and expensed with the expansion of the Newborn Screening Program. In addition the Family Planning Program significantly increased Medicaid income as well experienced unexpected additional costs in personnel and supplies. Both the Family Planning Program and the Maternity Program had to exhaust their fund balances to cover program expenses.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: AR

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 4,225,810	\$ 2,638,358	\$ 3,585,407	\$ 3,062,131	\$ 2,638,358	\$ 3,025,894
b. Infants < 1 year old	\$ 2,709,697	\$ 2,512,264	\$ 2,016,866	\$ 1,243,726	\$ 2,512,264	\$ 3,853,449
c. Children 1 to 22 years old	\$ 4,066,144	\$ 3,540,739	\$ 3,672,379	\$ 2,965,990	\$ 4,266,223	\$ 2,687,927
d. Children with Special Healthcare Needs	\$ 6,015,851	\$ 6,435,306	\$ 7,341,337	\$ 6,231,976	\$ 5,580,408	\$ 4,993,716
e. Others	\$ 12,287,935	\$ 11,847,272	\$ 11,656,758	\$ 10,335,523	\$ 12,849,662	\$ 12,738,993
f. Administration	\$ 1,501,157	\$ 1,495,157	\$ 984,911	\$ 436,478	\$ 1,495,157	\$ 1,127,711
g. SUBTOTAL	\$ 30,806,594	\$ 28,469,096	\$ 29,257,658	\$ 24,275,824	\$ 29,342,072	\$ 28,427,690
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 97,871		\$ 100,000		\$ 100,000	
c. CISS	\$ 99,062		\$ 87,686		\$ 140,000	
d. Abstinence Education	\$ 679,837		\$ 668,752		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 75,140,509		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,021,299		\$ 149,326		\$ 140,151	
j. Education	\$ 0		\$ 0		\$ 124,812	
k. Other						
HRSA	\$ 0		\$ 169,441		\$ 178,676	
Title X	\$ 0		\$ 3,750,273		\$ 3,340,558	
Title X Fam Plan	\$ 3,421,593		\$ 0		\$ 0	
III. SUBTOTAL	\$ 80,460,171		\$ 4,925,478		\$ 4,024,197	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: AR

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 3,029,303	\$ 3,013,833	\$ 2,484,696	\$	\$ 2,649,786	\$
b. Infants < 1 year old	\$ 1,342,297	\$ 4,029,153	\$ 3,361,118	\$	\$ 4,663,610	\$
c. Children 1 to 22 years old	\$ 4,396,430	\$ 5,142,517	\$ 4,240,023	\$	\$ 5,453,294	\$
d. Children with Special Healthcare Needs	\$ 5,664,017	\$ 5,230,691	\$ 5,872,374	\$	\$ 5,730,830	\$
e. Others	\$ 8,836,393	\$ 13,511,111	\$ 11,259,299	\$	\$ 14,355,889	\$
f. Administration	\$ 597,886	\$ 782,204	\$ 1,163,653	\$	\$ 1,464,792	\$
g. SUBTOTAL	\$ 23,866,326	\$ 31,709,509	\$ 28,381,163	\$ 0	\$ 34,318,201	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 93,748		\$ 100,000	
c. CISS	\$ 105,697		\$ 105,000		\$ 245,000	
d. Abstinence Education	\$ 565,101		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 100,852		\$ 157,461		\$ 530,483	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
HRSA	\$ 112,365		\$ 198,090		\$ 183,052	
Title X	\$ 0		\$ 3,985,558		\$ 3,904,621	
Title X	\$ 4,273,354		\$ 0		\$ 0	
III. SUBTOTAL	\$ 5,252,013		\$ 4,539,857		\$ 4,963,156	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2008
Field Note:
Significant increases in pay for nurses in our maternity clinics, due to a new pay grid, drove salaries and fringe up. In addition, increases in laboratory and ultra sounds costs contributed to expenses being higher than projected.
2. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Budgeted
Row Name: Infants <1 year old
Column Name: Budgeted
Year: 2009
Field Note:
Growth in spending expected for New Born Screening Program. 09/15/2008.
3. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain. In addition, we have included additional funds expensed on the Newborn Screening Program that represent expansion of that program and lab costs that were not included before.
4. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2008
Field Note:
Expansion of our newborn screening program resulted in expenses being higher than projected. Additional expenses were incurred in Newborn Hearing as well.
5. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Budgeted
Row Name: Children 1 to 22 years old
Column Name: Budgeted
Year: 2009
Field Note:
Changes in budget based on more refined estimates 09/15/2009
6. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted, especially in Direct Care Services for immunizations. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain.
7. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2008
Field Note:
Increased expenses for salary and fringe for clinic staff resulted in higher than projected costs.
8. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNBudgeted
Row Name: CSHCN
Column Name: Budgeted
Year: 2009
Field Note:
Budget estimates refined 09/12/2008.
9. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2008
Field Note:
Expenses were reduced because income was below forecast and less state funds were received than projected.
10. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted, especially in Direct Care Services. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain.
11. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AdminBudgeted
Row Name: Administration
Column Name: Budgeted
Year: 2009

Field Note:
Budget estimate was refined on 09/12/2008.

12.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2009

Field Note:
Additional support personnel has been added, along with a better cost allocation estimate for the administration of the ADH Program.
13.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2008

Field Note:
Administrative spending was held to less than projected, to make funds available for unexpected expenses in salary and fringe.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: AR

TYPE OF SERVICE	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 13,231,720	\$ 12,197,625	\$ 18,417,696	\$ 15,281,631	\$ 12,564,275	\$ 17,016,929
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 9,393,357	\$ 9,025,237	\$ 5,839,829	\$ 4,845,454	\$ 9,330,779	\$ 5,743,037
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 5,902,853	\$ 5,224,055	\$ 1,813,975	\$ 1,505,102	\$ 5,363,731	\$ 3,434,997
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,278,664	\$ 2,022,179	\$ 3,186,158	\$ 2,643,637	\$ 2,083,287	\$ 2,232,727
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 30,806,594	\$ 28,469,096	\$ 29,257,658	\$ 24,275,824	\$ 29,342,072	\$ 28,427,690

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: AR

TYPE OF SERVICE	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 14,772,736	\$ 19,106,684	\$ 16,734,136	\$	\$ 20,149,556	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 4,684,096	\$ 5,481,983	\$ 6,026,875	\$	\$ 6,102,013	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,853,893	\$ 4,787,836	\$ 3,279,487	\$	\$ 5,412,611	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,555,601	\$ 2,333,006	\$ 2,340,665	\$	\$ 2,654,021	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 23,866,326	\$ 31,709,509	\$ 28,381,163	\$ 0	\$ 34,318,201	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted, especially in Direct Care Services. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain.
- 2. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2008
Field Note:
Despite efforts to shift money from direct services to population and infrastructure building services, gap filling remained an essential use of MCH funds. The increase in the cost of personnel and supplies continued to drive expenditures up in direct services compared to the year before.
- 3. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain. .
- 4. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2008
Field Note:
Reduced income from services and other funding sources resulted in expenses below forecast.
- 5. Section Number:** Form5_Main
Field Name: PopBasedBudgeted
Row Name: Population-Based Services
Column Name: Budgeted
Year: 2009
Field Note:
Budget number refined on 09/12/2008.
- 6. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2009
Field Note:
Total expenditures were greater than those budgeted, especially in Direct Care Services. The ADH's new time allocation system has captured significantly greater effort in the MCH programs, which is paid with State general revenue. This is a more accurate estimate than we previously were able to obtain. In addition, we have included additional funds expensed on the Newborn Screening Program that represent expansion of that program and lab costs that were not included before.
- 7. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2008
Field Note:
Funds tied to direct services continued to require the largest share of available funds. Funds that were hoped to be available for infrastructure building were needed to fill gaps in needed direct services.
- 8. Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2008
Field Note:
The expansion of the Newborn Screening Program resulted in expenses greater than forecast.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: AR

Total Births by Occurrence: 38,727

Reporting Year: 2009

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	38,164	98.5	68	1	1	100
Congenital Hypothyroidism	38,164	98.5	1,449	25	25	100
Galactosemia	38,164	98.5	80	0	0	
Sickle Cell Disease	38,164	98.5	17	17	17	100

Other Screening (Specify)

Biotinidase Deficiency	38,164	98.5	2	2	2	100
Cystic Fibrosis	38,164	98.5	752	8	8	100
Very Long-Chain Acyl-CoA Dehydrogenase Deficiency	38,164	98.5	16	1	1	100
Citrullinemia	38,164	98.5	9	2	2	100
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	38,164	98.5	468	2	2	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	38,164	98.5	25	2	2	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Form6_Main
Field Name: SickCellDisease_Confirmed
Row Name: SickCellDisease
Column Name: Confirmed Cases
Year: 2011
Field Note:
Hemoglobinopathy screening has an extremely high positive predictive value; the numbers provided are correct.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: AR

Reporting Year: 2009

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	51,591	54.0	3.0	43.0		
Infants < 1 year old	61,540	54.0	3.0	43.0		
Children 1 to 22 years old	495,925	53.1	12.6	34.3		
Children with Special Healthcare Needs	14,376	93.2	4.6	1.3	0.7	0.2
Others	95,518	30.0	0.0	70.0	0.0	0.0
TOTAL	718,950					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Form7_Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2011
Field Note:
Occurrence births multiplied by 1.33.
Logic of 1.33 - As pregnancies last 9 months, many pregnant women are served in more than one calendar year. Thus we count all women whose first prenatal visit occurred in the current year, and those women served in the prior year who did not deliver until the current year. We assumed that if a pregnancy lasts 9 months, then an additional 3 months for women who will deliver in the next year will also be served $12/9 = 1.33$.

38,790 births occurred in Arkansas in 2009. $38,790 \times 1.33 = 51,591$.
2. **Section Number:** Form7_Main
Field Name: PregWomen_XIX
Row Name: Pregnant Women
Column Name: Title XIX %
Year: 2011
Field Note:
In 2008, 57.0% of births were paid by Medicaid, which in Arkansas, includes SCHIP "unborn child provision" births. We estimate that 3% of Medicaid paid births were SCHIP. These percentages were applied to projected number of pregnant women served by Title V in 2009.

Thus, Title XIX funded pregnant women is estimated at 54%.
3. **Section Number:** Form7_Main
Field Name: Children_0_1_TS
Row Name: Infants <1 year of age
Column Name: Title V Total Served
Year: 2011
Field Note:
Infants less than 1 year of age served by Title V are 2009 births that occurred in Arkansas and number of individuals less than 1 year of age that received at least one immunization in 2008.
4. **Section Number:** Form7_Main
Field Name: Children_0_1_XIX
Row Name: Infants <1 year of age
Column Name: Title XIX %
Year: 2011
Field Note:
In 2008, 57.0% of births were paid by Medicaid, which in Arkansas, includes SCHIP "unborn child provision" births. We estimate that 3% of Medicaid paid births were SCHIP. These percentages were applied to the number of occurrence births in 2009.

Thus, Title XIX funded infants less than one year is estimated at 54%.
5. **Section Number:** Form7_Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2011
Field Note:
Children 1-22 years served broken into:

WIC 1-4 years: 56,000
Immunizations 1-22 years: 109,175
Family planning up to 22 years: 20,000
Maternity up to 22 years: 1,500
WIC maternity up to 22 years: 12,250
ConnectCare links to PCPs: 47,000
School/mass clinic flu shots: 250,000
6. **Section Number:** Form7_Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2011
Field Note:
Title V funds used in Arkansas also support family planning and WIC services through salaries for Women's Health Nurse Practitioners.

Women greater than 22 years of age, broken into:

Family Planning: 56,500
WIC: 39,018

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: AR

Reporting Year: 2009

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	38,790	29,362	7,201	255	72	576	0	1,324
Title V Served	38,164	28,888	7,085	251	71	567	0	1,302
Eligible for Title XIX	22,095	15,115	5,716	166	23	161	0	914
INFANTS								
Total Infants in State	39,665	29,782	7,643	152	77	570	0	1,441
Title V Served	38,790	29,362	7,201	255	72	576	0	1,324
Eligible for Title XIX	22,675	15,331	6,066	99	25	159	0	995

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	34,679	4,035	76	3,179	15	57	721	63
Title V Served	34,119	3,970	75	3,128	15	56	709	62
Eligible for Title XIX	19,061	3,009	50	2,442	10	33	492	32
INFANTS								
Total Infants in State	35,339	4,195	131	3,312	16	61	730	76
Title V Served	34,679	4,035	76	3,179	15	57	721	63
Eligible for Title XIX	19,423	3,126	86	2,544	11	35	498	38

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_All
Row Name: Total Deliveries in State
Column Name: Total All Races
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
2. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_White
Row Name: Total Deliveries in State
Column Name: White
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
3. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_Black
Row Name: Total Deliveries in State
Column Name: Black or African American
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
4. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_Indian
Row Name: Total Deliveries in State
Column Name: American Indian or Native American
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
5. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_Asian
Row Name: Total Deliveries in State
Column Name: Asian
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
6. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_Hawaiian
Row Name: Total Deliveries in State
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
7. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_More
Row Name: Total Deliveries in State
Column Name: More Than One Race Reported
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
8. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_RaceOther
Row Name: Total Deliveries in State
Column Name: Other and Unknown
Year: 2011
Field Note:
Total deliveries in the state by race are 2009 births that occurred in Arkansas by race of mother.
9. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
10. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_White
Row Name: Title V Served
Column Name: White
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
11. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Black
Row Name: Title V Served
Column Name: Black or African American
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.

12. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Indian
Row Name: Title V Served
Column Name: American Indian or Native American
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
13. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Asian
Row Name: Title V Served
Column Name: Asian
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
14. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Hawaiian
Row Name: Title V Served
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
15. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_More
Row Name: Title V Served
Column Name: More Than One Race Reported
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
16. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_RaceOther
Row Name: Title V Served
Column Name: Other and Unknown
Year: 2011
Field Note:
Total deliveries served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas by race of mother.
17. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.
18. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_White
Row Name: Eligible for Title XIX
Column Name: White
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.
19. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Black
Row Name: Eligible for Title XIX
Column Name: Black or African American
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.
20. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Indian
Row Name: Eligible for Title XIX
Column Name: American Indian or Native American
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.
21. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Asian
Row Name: Eligible for Title XIX
Column Name: Asian
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.
22. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Hawaiian
Row Name: Eligible for Title XIX
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2011

Field Note:

Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.

23. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** DeliveriesTitleXIX_More**Row Name:** Eligible for Title XIX**Column Name:** More Than One Race Reported**Year:** 2011**Field Note:**

Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.

24. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** DeliveriesTitleXIX_RaceOther**Row Name:** Eligible for Title XIX**Column Name:** Other and Unknown**Year:** 2011**Field Note:**

Total deliveries in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by Medicaid by race of mother to number of 2009 births that occurred in Arkansas by race of mother.

25. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_All**Row Name:** Total Infants in State**Column Name:** Total All Races**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

26. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_White**Row Name:** Total Infants in State**Column Name:** White**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

27. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_Black**Row Name:** Total Infants in State**Column Name:** Black or African American**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

28. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_Indian**Row Name:** Total Infants in State**Column Name:** American Indian or Native American**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

29. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_Asian**Row Name:** Total Infants in State**Column Name:** Asian**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

30. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_Hawaiian**Row Name:** Total Infants in State**Column Name:** Native Hawaiian or Other Pacific Islander**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

31. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_More**Row Name:** Total Infants in State**Column Name:** More Than One Race Reported**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

32. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTotal_RaceOther**Row Name:** Total Infants in State**Column Name:** Other and Unknown**Year:** 2011**Field Note:**

Total infants in the state by are 2009 births that occurred to Arkansas residents by race of mother.

33. Section Number: Form8_I. Unduplicated Count By Race**Field Name:** InfantsTitleV_All**Row Name:** Title V Served**Column Name:** Total All Races**Year:** 2011**Field Note:**

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

34. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_White

Row Name: Title V Served

Column Name: White

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

35. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_Black

Row Name: Title V Served

Column Name: Black or African American

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

36. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_Indian

Row Name: Title V Served

Column Name: American Indian or Native American

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

37. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_Asian

Row Name: Title V Served

Column Name: Asian

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

38. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_Hawaiian

Row Name: Title V Served

Column Name: Native Hawaiian or Other Pacific Islander

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

39. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_More

Row Name: Title V Served

Column Name: More Than One Race Reported

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

40. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleV_RaceOther

Row Name: Title V Served

Column Name: Other and Unknown

Year: 2011

Field Note:

Total infants in the state served by Title V by race were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents by race of mother.

41. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_All

Row Name: Eligible for Title XIX

Column Name: Total All Races

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

42. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_White

Row Name: Eligible for Title XIX

Column Name: White

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

43. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Black

Row Name: Eligible for Title XIX

Column Name: Black or African American

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

44. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Indian

Row Name: Eligible for Title XIX

Column Name: American Indian or Native American

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

45. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Asian

Row Name: Eligible for Title XIX

Column Name: Asian

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

46. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Hawaiian

Row Name: Eligible for Title XIX

Column Name: Native Hawaiian or Other Pacific Islander

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

47. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_More

Row Name: Eligible for Title XIX

Column Name: More Than One Race Reported

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

48. Section Number: Form8_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_RaceOther

Row Name: Eligible for Title XIX

Column Name: Other and Unknown

Year: 2011

Field Note:

Total infants in the state eligible for Title XIX by race were determined by applying percentage of 2008 Arkansas occurrence births paid by medicaid by race of mother to number of 2009 births that occurred to Arkansas residents by race of mother.

49. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_TotalNotHispanic

Row Name: Total Deliveries in State

Column Name: Total Not Hispanic or Latino

Year: 2011

Field Note:

Total deliveries in the state that were not Hispanic or Latino are 2009 births that occurred in Arkansas to mothers who reported no Hispanic or Latino ethnicity.

50. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_TotalHispanic

Row Name: Total Deliveries in State

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total deliveries in the state that were Hispanic or Latino are 2009 births that occurred in Arkansas to mothers who reported Hispanic or Latino ethnicity.

51. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_NotReported

Row Name: Total Deliveries in State

Column Name: Ethnicity Not Reported

Year: 2011

Field Note:

Total deliveries in the state with unknown ethnicity are 2009 births that occurred in Arkansas to mothers with Hispanic or Latino ethnicity unknown.

52. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_Mexican

Row Name: Total Deliveries in State

Column Name: Mexican

Year: 2011

Field Note:

Deliveries in the state by Hispanic or Latino sub-categories are 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

53. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_Cuban

Row Name: Total Deliveries in State

Column Name: Cuban

Year: 2011

Field Note:

Deliveries in the state by Hispanic or Latino sub-categories are 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

54. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_PuertoRican

Row Name: Total Deliveries in State

Column Name: Puerto Rican

Year: 2011

Field Note:

Deliveries in the state by Hispanic or Latino sub-categories are 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

55. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_CentralAmerican

Row Name: Total Deliveries in State

Column Name: Central and South American

Year: 2011

Field Note:

Deliveries in the state by Hispanic or Latino sub-categories are 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

56. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_EthnicityOther
Row Name: Total Deliveries in State
Column Name: Other and Unknown
Year: 2011
Field Note:
Deliveries in the state by Hispanic or Latino sub-categories are 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
57. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalNotHispanic
Row Name: Title V Served
Column Name: Total Not Hispanic or Latino
Year: 2011
Field Note:
Total deliveries in the state served by Title V not Hispanic or Latino were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas mothers who reported no Hispanic or Latino ethnicity.
58. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalHispanic
Row Name: Title V Served
Column Name: Total Hispanic or Latino
Year: 2011
Field Note:
Total deliveries in the state served by Title V Hispanic or Latino were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas mothers who reported Hispanic or Latino ethnicity.
59. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_NotReported
Row Name: Title V Served
Column Name: Ethnicity Not Reported
Year: 2011
Field Note:
Total deliveries in the state served by Title V with unknown ethnicity were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas mothers with Hispanic or Latino ethnicity unknown.
60. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Mexican
Row Name: Title V Served
Column Name: Mexican
Year: 2011
Field Note:
Deliveries in the state served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
61. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Cuban
Row Name: Title V Served
Column Name: Cuban
Year: 2011
Field Note:
Deliveries in the state served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
62. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_PuertoRican
Row Name: Title V Served
Column Name: Puerto Rican
Year: 2011
Field Note:
Deliveries in the state served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
63. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_CentralAmerican
Row Name: Title V Served
Column Name: Central and South American
Year: 2011
Field Note:
Deliveries in the state served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
64. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_EthnicityOther
Row Name: Title V Served
Column Name: Other and Unknown
Year: 2011
Field Note:
Deliveries in the state served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.
65. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2011
Field Note:
Total deliveries in the state eligible for Title XIX not Hispanic or Latino were determined by applying percentage of 2008 Arkansas occurrence births to mothers not Hispanic or Latino paid by Medicaid to 2009 births that occurred in Arkansas to mothers who reported no Hispanic or Latino ethnicity.
66. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total deliveries in the state eligible for Title XIX Hispanic or Latino were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred in Arkansas to mothers who reported Hispanic or Latino ethnicity.

67. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_NotReported

Row Name: Eligible for Title XIX

Column Name: Ethnicity Not Reported

Year: 2011

Field Note:

Total deliveries in the state eligible for Title XIX with unknown ethnicity were determined by applying percentage of 2008 Arkansas occurrence births with unknown ethnicity paid by Medicaid to 2009 births that occurred to Arkansas mothers with Hispanic or Latino ethnicity unknown.

68. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_Mexican

Row Name: Eligible for Title XIX

Column Name: Mexican

Year: 2011

Field Note:

Deliveries in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to number of 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

69. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_Cuban

Row Name: Eligible for Title XIX

Column Name: Cuban

Year: 2011

Field Note:

Deliveries in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to number of 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

70. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_PuertoRican

Row Name: Eligible for Title XIX

Column Name: Puerto Rican

Year: 2011

Field Note:

Deliveries in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to number of 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

71. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_CentralAmerican

Row Name: Eligible for Title XIX

Column Name: Central and South American

Year: 2011

Field Note:

Deliveries in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to number of 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

72. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_EthnicityOther

Row Name: Eligible for Title XIX

Column Name: Other and Unknown

Year: 2011

Field Note:

Deliveries in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to number of 2009 births that occurred in Arkansas to Hispanic or Latino mothers from specified countries or areas of origin.

73. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_TotalNotHispanic

Row Name: Total Infants in State

Column Name: Total Not Hispanic or Latino

Year: 2011

Field Note:

Total infants in the state not Hispanic or Latino are 2009 births that occurred to Arkansas residents that reported no Hispanic or Latino ethnicity.

74. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_TotalHispanic

Row Name: Total Infants in State

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total infants in the state Hispanic or Latino are 2009 births that occurred to Arkansas residents with Hispanic or Latino ethnicity reported.

75. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_NotReported

Row Name: Total Infants in State

Column Name: Ethnicity Not Reported

Year: 2011

Field Note:

Total infants in the state with unknown ethnicity are 2009 births that occurred to Arkansas residents with Hispanic or Latino ethnicity unknown.

76. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_Mexican

Row Name: Total Infants in State

Column Name: Mexican

Year: 2011

Field Note:

Infants in the state by Hispanic or Latino sub-categories are 2009 births that occurred to Arkansas residents from specified countries or areas of origin.

77. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_Cuban

Row Name: Total Infants in State

Column Name: Cuban

Year: 2011

Field Note:

Infants in the state by Hispanic or Latino sub-categories are 2009 births that occurred to Arkansas residents from specified countries or areas of origin.

78. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_PuertoRican

Row Name: Total Infants in State

Column Name: Puerto Rican

Year: 2011

Field Note:

Infants in the state by Hispanic or Latino sub-categories are 2009 births that occurred to Arkansas residents from specified countries or areas of origin.

79. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_CentralAmerican

Row Name: Total Infants in State

Column Name: Central and South American

Year: 2011

Field Note:

Infants in the state by Hispanic or Latino sub-categories are 2009 births that occurred to Arkansas residents from specified countries or areas of origin.

80. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_EthnicityOther

Row Name: Total Infants in State

Column Name: Other and Unknown

Year: 2011

Field Note:

Infants in the state by Hispanic or Latino sub-categories are 2009 births that occurred to Arkansas residents from specified countries or areas of origin.

81. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2011

Field Note:

Total infants served by Title V not Hispanic or Latino were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents who reported no Hispanic or Latino ethnicity.

82. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total infants served by Title V Hispanic or Latino were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents who reported Hispanic or Latino ethnicity.

83. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_NotReported

Row Name: Title V Served

Column Name: Ethnicity Not Reported

Year: 2011

Field Note:

Total infants served by Title V with unknown ethnicity were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas residents with Hispanic or Latino ethnicity unknown.

84. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_Mexican

Row Name: Title V Served

Column Name: Mexican

Year: 2011

Field Note:

Infants served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

85. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_Cuban

Row Name: Title V Served

Column Name: Cuban

Year: 2011

Field Note:

Infants served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

86. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_PuertoRican

Row Name: Title V Served

Column Name: Puerto Rican

Year: 2011

Field Note:

Infants served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

87. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_CentralAmerican

Row Name: Title V Served

Column Name: Central and South American

Year: 2011

Field Note:

Infants served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

88. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_EthnicityOther

Row Name: Title V Served

Column Name: Other and Unknown

Year: 2011

Field Note:

Infants served by Title V by Hispanic or Latino sub-categories were determined by applying percentage of 2009 births with a newborn screen to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

89. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_TotalNotHispanic**Row Name:** Eligible for Title XIX**Column Name:** Total Not Hispanic or Latino**Year:** 2011**Field Note:**

Total infants in the state eligible for Title XIX not Hispanic or Latino were determined by applying percentage of 2008 Arkansas occurrence births to mothers not Hispanic or Latino paid by Medicaid to 2009 births that occurred to Arkansas residents who reported no Hispanic or Latino ethnicity.

90. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_TotalHispanic**Row Name:** Eligible for Title XIX**Column Name:** Total Hispanic or Latino**Year:** 2011**Field Note:**

Total infants in the state eligible for Title XIX Hispanic or Latino were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas residents who reported Hispanic or Latino ethnicity.

91. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_NotReported**Row Name:** Eligible for Title XIX**Column Name:** Ethnicity Not Reported**Year:** 2011**Field Note:**

Total infants eligible for Title XIX with unknown ethnicity were determined by applying percentage of 2008 Arkansas occurrence births with unknown ethnicity paid by Medicaid to 2009 births that occurred to Arkansas residents with Hispanic or Latino ethnicity unknown.

92. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_Mexican**Row Name:** Eligible for Title XIX**Column Name:** Mexican**Year:** 2011**Field Note:**

Infants in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

93. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_Cuban**Row Name:** Eligible for Title XIX**Column Name:** Cuban**Year:** 2011**Field Note:**

Infants in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

94. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_PuertoRican**Row Name:** Eligible for Title XIX**Column Name:** Puerto Rican**Year:** 2011**Field Note:**

Infants in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

95. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_CentralAmerican**Row Name:** Eligible for Title XIX**Column Name:** Central and South American**Year:** 2011**Field Note:**

Infants in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

96. Section Number: Form8_II. Unduplicated Count by Ethnicity**Field Name:** InfantsTitleXIX_EthnicityOther**Row Name:** Eligible for Title XIX**Column Name:** Other and Unknown**Year:** 2011**Field Note:**

Infants in the state eligible for Title XIX by Hispanic or Latino sub-categories were determined by applying percentage of 2008 Arkansas occurrence births to Hispanic or Latino mothers paid by Medicaid to 2009 births that occurred to Arkansas Hispanic or Latino residents from specified countries or areas of origin.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: AR

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	_____	_____	_____	_____	_____
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	_____	_____	_____	_____	_____
4. Contact Person's Telephone Number	_____	_____	_____	_____	_____
5. Contact Person's Email	_____	_____	_____	_____	_____
6. Number of calls received on the State MCH "Hotline" this reporting period	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: AR

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 232-0002	(800) 232-0002	(800) 232-0002	(800) 232-0002	(800)235-1131
2. State MCH Toll-Free "Hotline" Name	AR Resource and Health Information	AR Resource and Health Information	AR Resource and Health Information	AR Resource and Health Information	ConnectCare
3. Name of Contact Person for State MCH "Hotline"	Vanessa Crow	Vanessa Crow	Paula Shoemake	Paula Shoemake	Angela Johnson-Grimmet
4. Contact Person's Telephone Number	(501) 380-4533	(501) 380-4533	(501) 380-4533	(501) 280-4533	(501)280-4828
5. Contact Person's Email	Vanessa.Crow@arkansa:	Vanessa.Crow@arkansa:			
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	16,659	55	15,133

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Form9_Main
Field Name: calls_2
Row Name: Number of calls received On the State MCH Hotline This reporting period
Column Name: FY
Year: 2009
Field Note:
In FY 2008, there were a total of 15, 122 calls made to the State MCH Toll-Free Telephone Line.

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2011
[SEC. 506(A)(1)]
STATE: AR

1. State MCH Administration:
(max 2500 characters)

The MCH Block Grant funds come directly to the Arkansas Department of Health, and last year 34% of those funds were made available to the Department of Human Services, Division of Developmental Disabilities Services, Children's medical Services Program. Next year the budget allows for 31.34% of the grant funds to be transferred. The process of completing and submitting this application is a partnership with Ms. Nancy Holder and her CSHCN staff. The Arkansas Department of Health Title V has direct administrative control over the Women's Health Section which includes the Maternity Program, Family Planning Program and Midwifery regulation. In addition the Child and Adolescent Section, which houses the Newborn Screening Program and the Infant Hearing Program are also under the direct Title V administrative control. The Health Connections Section which helps assign PCPs to Medicaid recipients is also under Title V administration.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 7,097,785
3. Unobligated balance (Line 2, Form 2)	\$ 679,554
4. State Funds (Line 3, Form 2)	\$ 7,658,325
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 147,663
7. Program Income (Line 6, Form 2)	\$ 18,734,874
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 34,318,201

9. Most significant providers receiving MCH funds:

University of Arkansas for the Medical Sciences (U
UAMS Department of Pediatrics
Arkansas Children's Hospital
Dept. of Human Services, Div Developmental Dis

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	51,591
b. Infants < 1 year old	61,540
c. Children 1 to 22 years old	495,925
d. CSHCN	14,376
e. Others	95,518

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

The UAMS Dept. of OBGYN Contract supports Antenatal and Neonatal Guidelines for Learning and Education Systems (ANGELS), which has direct care and enabling services components. The Children's Hospital Contract supports enabling services. The UAMS Pediatrics Dept. support direct and enabling services. The MCH BG funding through the CSHCN Program support direct and enabling services.

b. Population-Based Services:
(max 2500 characters)

The MCH BG funding through the CSHCN program supports staff who partner with the Division of Developmental Disabilities Services to provide population-based services to disabled children. The immunization Program partners with private primary care physicians for immunizations of all children and many adults.

c. Infrastructure Building Services:
(max 2500 characters)

ADH MCH and CSHCN staff partner with DHS Division of Behavioral Health and the Division of Child Care and Early Childhood Education to support Early Childhood Comprehensive Systems planning and implementation grant, the Assuring Better Child Development TA Program, and the National Center for Children in Poverty Policy TA Project. Especially, these same staff support Arkansas's System of Care for Children's Mental Health Partnership. ADH Child and Adolescent Health Section has partnered with the Department of Education on the Coordinated School Health Program that has gone statewide. Additional partnerships have been formed on multiple subjects, that include the ADH joining with the Natural Wonders Collaboration (which includes Arkansas Advocates for Children and Families, Arkansas Blue Cross and Blue Shield, Arkansas Center for Health Improvement Arkansa Chapter of the American Academy of Pediatrics, Arkansas Children's Hospital, Arkansas Department of Health and Human Services, University of Arkansas at Little Rock, Institute for Economic Advancement, Clinton School of Public Service and the UAMS Fay W. Boozman College of Public Health. This group conducted a comprehensive assessment of children's health in this state. ADH continues to work with this group to focus on infant mortality.

12. The primary Title V Program contact person:

Name	Bradley Planey
Title	Associate Branch Chief, Family Health
Address	4815 W. Markham St. Slot-16
City	Little Rock
State	Arkansas

13. The children with special health care needs (CSHCN) contact person:

Name	Nancy Holder
Title	Program Director
Address	P.O. Box 1437, Slot S-380
City	Little Rock
State	Arkansas

Zip 72205-3867
Phone 501-661-2531
Fax 501-661-2464
Email Bradley.Planey@Arkansas.gov
Web

Zip 72203-1437
Phone 501-682-1464
Fax 501-682-8247
Email nancy.holder@arkansas.gov
Web

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	98	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	44	46	33	47	60
Denominator	44	46	33	47	60
Data Source				Newborn Screening Program	Newborn Screening Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

None

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	55	56	57	62	63
Annual Indicator	53.7	53.7	61.7	61.7	61.7
Numerator	12,952	12,952	468	468	468
Denominator	24,116	24,116	759	759	759
Data Source				Data from Nat'l CSHCN Survey, 2005-2006	Data from Nat'l CSHCN Survey, 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	64	65	66	67	67
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data is from the National Survey of CSHCN conducted in 2005 - 2006.

A statewide survey was mailed to parents/guardians of CSHCN in early 2010. 93.7% of the respondents indicated they are often or always included in their child's health care decisions. 66.1% indicated their child's health care team often or always listened to their concerns or questions. The same percentage indicated that the health care team asks that the parent/guardian share with them their knowledge and expertise as the parent/caregiver. However, only 32.1% indicated that they were asked by the health care team how the child's condition affects the family (e.g. the impact on siblings, the time the child's care takes, lost sleep, extra expenses, etc.).

2. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data is from the National Survey of CSHCN conducted in 2005 - 2006.

3. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Data from our statewide survey completed in April 2008 was slightly higher at 65%.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	55	56	68	68	54
Annual Indicator	52.2	65.9	50.2	50.2	50.2
Numerator		120	379	379	379
Denominator		182	755	755	755
Data Source				This data comes from the National Survey of CSHCN	This data comes from the National Survey of CSHCN
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	53	57	59	60	60
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

This data comes from the National Survey of CSHCN 2005 - 2006.

In early 2010 a survey was mailed out to parents/guardians of CSHCN. The survey respondents answered the following questions on communication with the health care team. 71.4% answered often or always that the health care team uses helpful ways to communicate with me (e.g. explaining terms clearly, giving out forms to help us prepare for our visits). 48.2% answered often or always that the health care team uses helpful ways to communicate with my child. 70.5% answered that the health care team often or always understands the family's needs and values. 58% answered that they often or always have someone to help them understand all of the child's health services. 58.9% answered that they can often or always get the health care that my child needs when we need it, including after office hours, on weekends and holidays.

2. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

This data comes from the National Survey of CSHCN 2005 - 2006.

3. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03. Our statewide survey response to the question "After reading about Medical Home, do you believe your child's primary care doctor meets the qualifications of a Medical Home?" had a "Yes" response of 84%.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	56	57	62	66	67
Annual Indicator	54.5	61.5	66.5	66.5	66.5
Numerator	103	112	493	493	493
Denominator	189	182	741	741	741
Data Source				Data comes from the National Survey of CSHCN 2005	Data comes from the National Survey of CSHCN 2005
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	68	69	70	70	70
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data comes from the National Survey of CSHCN 2005 - 2006.

A survey was mailed to parents/guardians in early 2010. 75.9% answered often or always that "I have insurance to cover my child's health care services." 75% answered often or always to the statement "My child's health problems have an impact on our family." A supposition is made that financial impact is a portion of the family impact.

2. Section Number: Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data comes from the National Survey of CSHCN 2005 - 2006.

3. Section Number: Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey. Our statewide survey completed in April 2008 indicates that 65% of respondents state that insurance (public or private) covers the cost of their child's care. Yet on a question about out of pocket medical costs with 92 affirmative respondents, 47% paid from \$1 to \$1000 per year and 28% paid over \$1000 per year out of pocket.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>50</u>	<u>51</u>	<u>52</u>	<u>90</u>	<u>90</u>
Annual Indicator	<u>48.9</u>	<u>48.9</u>	<u>89.1</u>	<u>89.1</u>	<u>89.1</u>
Numerator	<u>64</u>	<u>64</u>	<u>688</u>	<u>688</u>	<u>688</u>
Denominator	<u>131</u>	<u>131</u>	<u>772</u>	<u>772</u>	<u>772</u>
Data Source				Data comes from the National Survey of CSHCN 2005	Data comes from the National Survey of CSHCN 2005
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>90</u>	<u>90</u>	<u>90</u>	<u>90</u>	<u>90</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2009

Field Note:

Data comes from the National Survey of CSHCN 2005 - 2006.

Although data for this measure was taken from the National Survey of CSHCN in 2005, the subject was addressed somewhat on a survey mailed to parents/guardians in early 2010. When asked to prioritize the needs of CSHCN in the state, the respondents ranked "community-based services organized so that families can easily access them" as the second priority behind the number one priority of "Adequate Health Insurance".

2. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2008

Field Note:

Data comes from the National Survey of CSHCN 2005 - 2006.

3. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	11	11	15	34	35
Annual Indicator	10.5	10.5	33.1	33.1	33.1
Numerator	4	4	114	114	114
Denominator	38	38	344	344	344
Data Source				Data comes from the National Survey of CSHCN 2005	Data comes from the National Survey of CSHCN 2005
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	36	37	38	38	38
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data comes from the National Survey of CSHCN 2005 - 2006.

A survey mailed to parents/guardians in early 2010 included statements related to transition: "There is someone who has helped us or is helping us find adult care for my child" with a 32% "Yes" response rate and "We are making plans for the time my child becomes an adult" with a 52% "Yes" response rate. In addition, "Transition to adulthood" was listed as one of the "Services received from Title V Children's Services staff". A final question asked the respondents to prioritize the needs of the state's CYSHCN. Transition to adulthood was ranked last under (in order of the ranked priority by respondents) Adequate health insurance; community-based services organized so that families can easily use them; respite care; families as partners at all levels of care and satisfied with services; receiving coordinated, comprehensive, ongoing care within a medical home; and dental health.

2. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data comes from the National Survey of CSHCN 2005 - 2006.

3. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data. Our statewide survey mirrors the National Survey of CSHCN with a 33% response to question asking if there is a Transition Plan in place.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	80	85	87	88	80
Annual Indicator	83.4	86.8	79.4	77.9	83.0
Numerator	3,269	3,375	5,848	6,701	5,812
Denominator	3,921	3,887	7,363	8,601	7,000
Data Source				Vaccines For Children Program Co-CASA	Vaccines for Children Program Co-CASA
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	84	84	85	87	88
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data are from the Comprehensive Clinic Assessment Software Application (Co-CASA) program from the Vaccines for Children (VFC) Program.

The denominator is the number of children sampled at local health units and participating VFC private providers. The numerator is the number of children with complete vaccine records from those sampled.

2. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

Change in percent complete age appropriate immunizations for 2008 reflect addition of participating VFC private providers that provided immunizations to Arkansas children 19 to 35 months of age.

2008 data are from the Comprehensive Clinic Assessment Software Application (Co-CASA) program from the Vaccines for Children (VFC) Program.

The denominator is the number of children sampled at local health units and participating VFC private providers. The numerator is the number of children with complete vaccine records from those sampled.

3. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data were changed to reflect addition of immunizations provided by participating Vaccines for Children (VFC) private providers.

2007 data are from the Comprehensive Clinic Assessment Software Application (Co-CASA) program from the Vaccines for Children (VFC) Program.

The denominator is the number of children sampled at the local health units. The numerator is the number of children with complete vaccine records from those sampled.

The data are from ADH local health units and do not include private providers.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	28	28	31	32	29.5
Annual Indicator	29.0	30.5	30.8	30.6	27.7
Numerator	1,661	1,796	1,813	1,780	1,612
Denominator	57,234	58,842	58,877	58,092	58,092
Data Source				2008 Birth Certificates	2009 Birth Certificates
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	27.5	27	26.5	26.5	26
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2009

Field Note:

2008 female population 15-17 years was used to compute 2009 rate.

2. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2008

Field Note:

2007 female population 15-17 years was used to compute 2008 rate.

The Abstinence Education and Unwed Birth Prevention activities, which are aimed at teen pregnancy prevention, have been significantly cutback due to reductions in state and other funding. In addition, the Federal funds for abstinence education have been harder to utilize due the uncertainty and delayed disbursement of the funds from the federal government.

3. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

The Abstinence Education and Unwed Birth Prevention activities, which are aimed at teen pregnancy prevention, have been significantly cutback due to reductions in state and other funding. In addition, the Federal funds for abstinence education have been harder to utilize due the uncertainty and delayed disbursement of the funds from the federal government.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	30	16	18	19	18
Annual Indicator	15.0	15.0	15.0	17.0	20.2
Numerator	1,071	656	197	206	132
Denominator	7,138	4,376	1,312	1,214	654
Data Source				Oral Health Branch, ADH	Oral Health Branch
Do not report the numerator because there were fewer than 5 events over the last year, and the 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	21	22	23	24	25
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2009**Field Note:**

A statewide dental screening survey was not conducted in 2008. Results are limited to dental screenings done by request of a local agency or organization.

A state-wide, county specific oral health needs assessment is being conducted in 2010. The survey, using contract dental hygienists in every part of the state, intends to screen as many as 9,000 third-grade students in the Spring of 2010.

2. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

A statewide dental screening survey was not conducted in 2008. Results are limited to dental screenings done by request of a local agency or organization.

3. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

A statewide dental screening survey was not conducted in 2007. Results are limited to dental screenings done by request of a local agency or organization.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	7	4.2	6	6	3.9
Annual Indicator	5.7	7.5	5.7	3.9	3.3
Numerator	32	43	33	23	19
Denominator	557,472	569,943	579,442	583,073	583,073
Data Source				2008 Death Certificates	2009 Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	3.2	3.1	3	2.8	2.7
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 population estimate 0-14 years was used to calculate 2009 rate.

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

2007 population estimate 0-14 years was used to calculate 2008 rate.

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

3. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 death data are provisional.

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		14	25	26	27
Annual Indicator	13.6	24.6	23.4	26.4	26.6
Numerator	3,425	8,960	8,913	10,147	10,016
Denominator	25,095	36,481	38,017	38,428	37,653
Data Source				2007 PRAMS survey	2008 PRAMS Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	28	28	29	30	31
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data are from the 2008 PRAMS survey.

Denominator is total (weighted) number of women surveyed in 2008.

Numerator is total (weighted) number of women who responded "Yes" to the question, "Are you still breastfeeding or feeding pumped milk to your new baby?" on the 2008 PRAMS survey.

The age of babies of PRAMS respondents ranges from 2 months to 9 months with the majority occurring around 4 months. This may lead to a possible overestimation of mothers breastfeeding their babies at 6 months of age.

2. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data are from the 2007 PRAMS survey.

Denominator is total (weighted) number of women surveyed in 2007.

Numerator is total (weighted) number of women who responded "Yes" to the question, "Are you still breastfeeding or feeding pumped milk to your new baby?" on the 2007 PRAMS survey.

The age of babies of PRAMS respondents ranges from 2 months to 9 months with the majority occurring around 4 months. This may lead to a possible overestimation of mothers breastfeeding their babies at 6 months of age.

3. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 source is 2006 PRAMS survey.

Denominator is total (weighted) number of women surveyed in 2006.

Numerator is total (weighted) number of women who responded "Yes" to the question, "Are you still breastfeeding or feeding pumped milk to your new baby?" on the 2006 PRAMS survey.

The age of babies of PRAMS respondents ranges from 2 months to 9 months with the majority occurring around 4 months. This may lead to a possible overestimation of mothers breastfeeding their babies at 6 months of age.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	97	97.9	98.3	98.4	99
Annual Indicator	97.8	98.2	98.2	99.0	98.9
Numerator	36,789	37,866	38,978	38,468	37,457
Denominator	37,610	38,573	39,682	38,865	37,883
Data Source				ADH Infant Hearing Program	ADH Infant Hearing Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	99	99	99	99	99
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2009**Field Note:**

The denominator is the number of forms received from birthing hospitals (37,883). The numerator is the number of infants (reported on forms) that received hearing screens (37,457) before hospital discharge.

2. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2008**Field Note:**

Denominator is number of forms received from hospitals (38,865). Numerator is number of infants (reported on forms) that received hearing screens (38,468).

3. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

Denominator is number of forms received from hospitals (39,682). Numerator is number of infants (reported on forms) that received hearing screens (38,978).

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	7	7	10.8	10.8	6
Annual Indicator	10.7	9.3	9.3	6.2	9.2
Numerator	72,000	65,000	65,167	44,425	65,157
Denominator	673,000	699,000	698,812	719,784	710,422

Data Source

US Census Bureau US Census Bureau

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	8.5	7	6	5.5	5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 indicator populated with 2008 data.

Data source: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009

2. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 indicator populated with 2007 data.

Data source: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2008

3. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 indicator populated with 2006 data.

Data source: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2007

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective		12.9	12.9	12.9	15.5
Annual Indicator	12.7	12.6	15.8	15.9	16.8
Numerator	3,893	4,159	5,590	6,136	7,369
Denominator	30,655	33,008	35,378	38,591	43,801
Data Source				2008 WIC-PEDNSS	2008 WIC-PEDNSS
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
If you cannot report the numerator because of the reasons above, explain in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	16	14.5	14.5	14	13.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2009**Field Note:**

The majority of children receiving WIC services are preschool age children.

Data are from the PEDNSS report provided by CDC.

2. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2008**Field Note:**

The majority of children receiving WIC services are preschool age children.

Data are from the PEDNSS report provided by CDC.

3. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2007**Field Note:**

The majority of children receiving WIC services are preschool age children.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		18.4	20.9	20.7	18.5
Annual Indicator	18.5	20.9	19.4	18.8	24.0
Numerator	6,339	7,552	7,326	7,099	8,866
Denominator	34,339	36,160	37,683	37,857	36,987
Data Source				2007 PRAMS Survey	2008 PRAMS Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	19.5	18.5	17.6	17.3	17
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data are from the 2008 PRAMS survey.

2. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data are from the 2007 PRAMS survey.

3. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data source is 2006 PRAMS survey.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	4.5	10	9	8	10
Annual Indicator	14.2	9.7	8.1	10.6	7.1
Numerator	28	19	16	21	14
Denominator	196,748	196,492	197,560	197,229	197,229
Data Source				2008 Death Certificates	2009 Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	7	7	7	6.5	6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2009

Field Note:

2008 population estimate 15-19 years was used for 2009 rate.

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2008

Field Note:

2007 population estimate 15-19 years was used for 2008 rate.

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

3. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

2007 death data are provisional.

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	67	67	69	70	70
Annual Indicator	66.5	66.0	58.8	64.6	70.2
Numerator	451	479	448	451	465
Denominator	678	726	762	698	662
Data Source				2008 Birth Certificates	2009 Birth Certificates
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	71	71	72	72	73
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 indicator represent data from Federal Fiscal year 2009.
- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2008
Field Note:
 2008 indicator represent data from Federal Fiscal year 2008.
- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2007
Field Note:
 2007 indicator represent data from Federal Fiscal year 2007.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	81	81	81	82	82
Annual Indicator	78.8	77.3	76.4	76.4	76.1
Numerator	30,827	31,065	31,602	31,450	29,881
Denominator	39,101	40,203	41,380	41,168	39,261
Data Source				2008 Birth Certificates	2009 Birth Certificates
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	82	82	82	82	82
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 indicator represent data from Federal Fiscal Year 2000.
- Section Number:** Form11_Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2008
Field Note:
 2008 indicator represent data from Federal Fiscal Year 2008.
- Section Number:** Form11_Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2007
Field Note:
 2007 indicator represent data from Federal Fiscal Year 2007.

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

The percent of Arkansas high school students who have engaged in sexual intercourse.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		55	55	55	54
Annual Indicator	54	54	54.9	54.9	53.6
Numerator					
Denominator					
Data Source				2007 YRBSS	2009 YRBSS
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	53	52	51	50	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2009
Field Note:
 Data source: 2009 YRBSS, Centers for Disease Control and Prevention.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2008
Field Note:
 Data source: 2007 YRBSS.
 YRBSS is conducted in odd years. The 2007 survey results are reported for the 2008 indicator.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2007
Field Note:
 Data source is 2007 national Youth Risk Behavior Survey.

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR

The percentage of children through age 18 and below 200 percent of poverty enrolled in ARKids First child health insurance program.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>18</u>	<u>85</u>	<u>35</u>	<u>35</u>	<u>79</u>
Annual Indicator	<u>85.6</u>	<u>91.2</u>	<u>76.4</u>	<u>76.9</u>	<u>83.5</u>
Numerator	<u>290,170</u>	<u>295,053</u>	<u>305,720</u>	<u>301,038</u>	<u>314,641</u>
Denominator	<u>339,000</u>	<u>323,408</u>	<u>400,372</u>	<u>391,490</u>	<u>376,788</u>
Data Source				Arkansas Medicaid Program	Arkansas Medicaid Program
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>82</u>	<u>82</u>	<u>82</u>	<u>82</u>	<u></u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2009**Field Note:**

Population below 200 percent of poverty data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009. 2009 population below 200 percent of poverty are from 2008.

ARKids First Enrollment data source: DHS Medicaid Program. This is an unduplicated count.

2. Section Number: Form11_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2008**Field Note:**

Population below 200 percent of poverty data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2008. 2008 population below 200 percent of poverty are from 2007.

ARKids First Enrollment data source: DHS Medicaid Program. This is an unduplicated count.

3. Section Number: Form11_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 population below 200 percent of poverty are from 2006.

Population below 200 percent of poverty data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2007.

ARKids First Enrollment data source: DHS Medicaid Program. This is an unduplicated count.

STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR

The percent of pregnant women counseled for HIV testing.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	75	0	0	68	69
Annual Indicator	67.4	67.4	67.0	66.7	64.4
Numerator	23,760	23,760	24,604	24,458	23,233
Denominator	35,276	35,276	36,724	36,649	36,057
Data Source				2007 Arkansas PRAMS	2008 Arkansas PRAMS Survey
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>70</u>	<u>71</u>	<u>72</u>	<u>73</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data source: 2008 PRAMS data are used for 2009 indicator.

2. Section Number: Form11_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data source: 2008 data are from the 2007 PRAMS survey.

3. Section Number: Form11_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data source is 2006 PRAMS survey.

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR

Percentage of children receiving WIC services who are above the 95th percentile on the National Center for Health Statistic weight for height growth charts.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	5	5	5	11.5	13
Annual Indicator	10.7	11.2	11.2	13.9	20.4
Numerator	7,876	8,781	9,553	5,364	8,935
Denominator	73,610	78,402	85,295	38,591	43,801
Data Source				Arkansas WIC - PEDNSS (CDC)	Arkansas WIC - PEDNSS (CDC)
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	12	11	10	9.7	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2009**Field Note:**

The majority of children receiving WIC services are preschool age children.
Data are from the PEDNSS report provided by CDC.

2. Section Number: Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2008**Field Note:**

The majority of children receiving WIC services are preschool age children.
Data are from the PEDNSS report provided by CDC.

3. Section Number: Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data are from the PEDNSS report provided by CDC.

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

To improve the percent of 14 to 15 year olds on Children's Medical Services (CMS) who state that CMS transition services have helped improve their knowledge and ability to transition into adult life.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>8</u>	<u>9</u>	<u>10</u>	<u>22</u>	<u>23</u>
Annual Indicator	<u>7.9</u>	<u>5.5</u>	<u>21.7</u>	<u>21.7</u>	<u>16.7</u>
Numerator	<u>3</u>	<u>10</u>	<u>15</u>	<u>15</u>	<u>6</u>
Denominator	<u>38</u>	<u>182</u>	<u>69</u>	<u>69</u>	<u>36</u>
Data Source				Data is from 2008 AR CSHCN program survey	Data is from 2010 AR CSHCN Survey
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>24</u>	<u>25</u>	<u>26</u>	<u>26</u>	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2009**Field Note:**

A survey was mailed to parents/guardians of CSHCN in early 2010. Statements on the survey related to transition included: "There is someone who has helped us or is helping us find adult care for my child.?" and "We are making plans for the time my child becomes an adult." In addition "Transition to adulthood" was listed as one of the "Services received from Title V Children's Services staff". Data for this performance measure was derived from the answers to those questions by taking the 36 positive responses to "There is someone who has helped us or is helping us find adult care for my child." and comparing it to the 6 respondents who indicated that "Transition to Adulthood" was one of the services received from Title V Children's Services staff. $6/36 = 17\%$.

2. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2008**Field Note:**

This information was taken from a survey completed in 2008 which specifically asked about CMS transition services. Our Transition Survey mailed in the month of the YSHCN 14th birthday does not ask the specific question; however, does ask if there is contact with the CMS Care Coordinator. 27 of 94 respondents in the past year indicated 'Yes' to this question.

3. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2007**Field Note:**

This data was supplied from responses on our statewide survey done in early 2008 on Transition and program assistance provided by the states' Title V CSHCN staff.

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

Improve percent of parents responding to the question on Children's Medical Services (CMS) Parent Satisfaction Survey that CMS service coordination teams told them about other services available.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	61	63	65	52	56
Annual Indicator	51.9	51.9	55.7	55.7	53.2
Numerator	28	28	151	151	59
Denominator	54	54	271	271	111
Data Source				Data from AR CSHCN program survey	Data from AR CSHCN Survey 2010
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	57	58	58	58	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2009

Field Note:

A survey was mailed to parents/guardians of CSHCN early 2010. Several questions related to the issue of knowledge of services available and helping find needed resources; advocacy for the rights and services important to CSHCN; and satisfaction with services received from the Title V CSHCN caseworkers. 59 of 111 respondents indicated they received assistance finding needed resources. 69 of 111 respondents indicated satisfaction with the services received from Title V CSHCN caseworkers.

- Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2008

Field Note:

This data is taken from a family survey in early 2008.

- Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2007

Field Note:

This data was compiled from responses to our statewide surveys sent out in early 2008.

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

The percent of public school students overweight greater than 95th percentile.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	9	7	5	20.4	20.2
Annual Indicator	20.8	20.5	20.6	20.5	20.4
Numerator	77,351	75,596	75,544	36,599	36,560
Denominator	371,367	369,416	366,801	178,181	179,007
Data Source				Arkansas Center for Health Improvement	Arkansas Center for Health Improvement
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	20	19.8	19.6	19.4	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may				
Numerator	establish objectives for those measures on Form 11 for the new needs assessment period.				
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2009**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Six (Fall 2008 - Spring 2009).

The change in the numerator and denominator is a result of a legislative change in assessment periodicity established by Act 201 of 2007 to only include students in even-number grades (K, 2, 4, 6, 8, and 10).

2. Section Number: Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Five (Fall 2007 - Spring 2008).

The change in the numerator and denominator is a result of a legislative change in assessment periodicity established by Act 201 of 2007 to only include students in even-number grades (K, 2, 4, 6, 8, and 10).

3. Section Number: Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Four (Fall 2006 - Spring 2007).

Beginning in 2007, BMI measurements are done for every other grade - even grades from Kindergarten through grade 10. Some schools with pre-K programs are assessing these children as well.

The 2006 notes are in error regarding tracking of the same students year to year. Rather percentages are based on individual grades each year.

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

The percentage of at-risk for overweight children in Arkansas public schools.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>9</u>	<u>7</u>	<u>5</u>	<u>17.1</u>	<u>17</u>
Annual Indicator	<u>17.2</u>	<u>17.1</u>	<u>17.2</u>	<u>17.4</u>	<u>17.2</u>
Numerator	<u>63,943</u>	<u>63,315</u>	<u>63,059</u>	<u>30,917</u>	<u>30,840</u>
Denominator	<u>372,369</u>	<u>369,416</u>	<u>366,801</u>	<u>178,181</u>	<u>179,007</u>
Data Source				Arkansas Center for Health Improvement	Arkansas Center for Health Improvement
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>16.8</u>	<u>16.7</u>	<u>16.6</u>	<u>16.5</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may				
Numerator	establish objectives for those measures on Form 11 for the new needs assessment period.				
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2009**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Six (Fall 2008 - Spring 2009).

The change in the numerator and denominator is a result of a legislative change in assessment periodicity established by Act 201 of 2007 to only include students in even-number grades (K, 2, 4, 6, 8, and 10).

2. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Five (Fall 2007 - Spring 2008).

The change in the numerator and denominator is a result of a legislative change in assessment periodicity established by Act 201 of 2007 to only include students in even-number grades (K, 2, 4, 6, 8, and 10).

3. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Four (Fall 2006 - Spring 2007).

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR

The percent of women smoking during pregnancy.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	13	11	11	15	14.8
Annual Indicator	16.2	15.9	15.7	15.3	14.8
Numerator	6,370	6,530	6,504	6,188	5,635
Denominator	39,210	40,966	41,341	40,489	38,030
Data Source				2008 Birth Certificates	2009 Birth Certificates
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	14.4	14	13.5	13.4	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #9
Field Name: SM9
Row Name:
Column Name:
Year: 2009
Field Note:
 Source: 2009 Birth Certificate Data, Health Statistics Branch, Arkansas Department of Health
- Section Number:** Form11_State Performance Measure #9
Field Name: SM9
Row Name:
Column Name:
Year: 2008
Field Note:
 Source: 2008 Birth Certificate Data, Health Statistics Branch, Arkansas Department of Health
- Section Number:** Form11_State Performance Measure #9
Field Name: SM9
Row Name:
Column Name:
Year: 2007
Field Note:
 Source: 2007 Birth Certificate Data, Health Statistics Branch, Arkansas Department of Health

STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR

To increase the percentage of ADH Family Planning clients receiving nutritional counseling during an initial or annual visit in the Family Planning clinics.

<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008
Annual Performance Objective		0	80	86
Annual Indicator	73.7	75.6	84.0	83.9
Numerator	36,537	35,779	38,439	39,398
Denominator	49,582	47,341	45,770	46,968
Data Source				ADH: Business Objects
Is the Data Provisional or Final?				Final

<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013
Annual Performance Objective	88	89	90	91
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.			
Numerator				
Denominator				

Field Level Notes**1. Section Number:** Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

Source is Business Objects: family planning encounters that reported Nutritional Counseling-non WIC.

2. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source is Business Objects: family planning encounters that reported Nutritional Counseling-non WIC and 34 Nutrition assessments.

3. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source is Business Objects: family planning encounters that reported Nutritional Counseling-non WIC and 34 Nutrition assessments.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 12

None

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.4	8.3	8.3	8.3	8.3
Annual Indicator	8.1	8.8	7.7	7.4	7.1
Numerator	316	359	318	299	270
Denominator	39,210	40,962	41,341	40,489	38,030
Data Source				2008 Arkansas Birth and Death Certificates	2009 Arkansas Birth and Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	7	6.9	6.8	6.6	6.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2009

Field Note:

The 2009 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate than is reported for 2009.

2. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2008

Field Note:

The 2008 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate than is reported for 2008.

3. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2007

Field Note:

The 2007 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate than is reported for 2007.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.5	1.4	1.4	1.4	2
Annual Indicator	2.4	2.3	2.1	2.2	1.9
Numerator	15.5	16.6	13.4	13.1	11.6
Denominator	6.5	7.1	6.5	6	6
Data Source				2008 Arkansas Birth and Death Certificates	2009 Arkansas Birth and Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	1.9	1.8	1.7	1.6	1.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2009**Field Note:**

The 2009 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate for both race groups than is reported for 2009.

2. Section Number: Form12_Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2008**Field Note:**

The 2008 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate for both race groups than is reported for 2008.

3. Section Number: Form12_Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2007**Field Note:**

The 2007 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher infant mortality rate for both race groups than is reported for 2007.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.1	5	5	4.9	4.4
Annual Indicator	4.7	5.2	4.4	4.4	4.0
Numerator	186	211	181	177	153
Denominator	39,210	40,962	41,341	40,489	38,030
Data Source				2008 Arkansas Birth and Death Certificates	2009 Arkansas Birth and Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	4.3	4.2	4.2	4.2	4.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

The 2009 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher neonatal mortality rate than is reported for 2009.

2. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

The 2008 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher neonatal mortality rate than is reported for 2008.

3. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

The 2007 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher neonatal mortality rate than is reported for 2007.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.2	3.2	3.2	3.1	3.1
Annual Indicator	3.3	3.6	3.3	3.0	3.1
Numerator	130	148	137	122	117
Denominator	39,210	40,962	41,314	40,489	38,030
Data Source				2008 Arkansas Birth and Death Certificates	2009 Arkansas Birth and Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	3	3	3	3	3
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2009**Field Note:**

The 2009 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher post-neonatal mortality rate than is reported for 2009.

2. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

The 2008 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher post-neonatal mortality rate than is reported for 2008.

3. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

The 2007 data are lacking births/deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher post-neonatal mortality rate than is reported for 2007.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	9.6	9.6	9.6	9.6	9.4
Annual Indicator	9.7	10.5	9.3	10.2	8.1
Numerator	381	433	385	417	308
Denominator	39,445	41,220	41,580	40,762	38,222
Data Source				2008 Birth, Death and Fetal Death Certificates	2009 Birth, Death and Fetal Death Certificates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	9.3	9.2	9.2	9.2	9.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2009**Field Note:**

The 2009 data are lacking births/deaths/fetal deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death/fetal death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher perinatal mortality rate than is reported for 2009.

2. Section Number: Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

The 2008 data are lacking births/deaths/fetal deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death/fetal death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher perinatal mortality rate than is reported for 2008.

3. Section Number: Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

The 2007 data are lacking births/deaths/fetal deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee birth/death/fetal death certificates to Arkansas from other states, but the process may be prolonged.

In addition, infants born in Arkansas that have a high probability of dying (i.e., very low birth weight, multiple congenital anomalies, etc.) are followed up to determine if the infant did indeed die. This is a lengthy process.

These two circumstances above may ultimately result in a higher perinatal mortality rate than is reported for 2007.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	31	31	31	30	27.6
Annual Indicator	28.9	27.5	27.7	24.7	22.5
Numerator	150	146	149	134	122
Denominator	518,851	530,099	538,572	541,564	541,564
Data Source				2008 Arkansas Death Certificates	2009 Arkansas Death Certificates
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	22.4	22	21.7	21.5	21.3
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 population estimates 1-14 years used to compute 2009 rate.

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. Section Number: Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

2007 population estimate 1-14 years used to compute 2008 rate.

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

3. Section Number: Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2007.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 12

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: AR

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

1

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

1

4. Family members are involved in service training of CSHCN staff and providers.

0

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

Total Score: 9

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

This year the measurement for this form was done utilizing the instrument developed by the Wisconsin CSHCN program. Although there is still improvement to be made, we believe it is a more objective measurement than from years' past.

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: AR FY: 2011

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduce births to older teens.
2. Reduce smoking among women of childbearing age.
3. Improve trauma care for children.
4. Improve oral health in children and women.
5. Reduce obesity and overweight among school-aged children.
6. Improved communication between the Title V CSHCN program and the CSHCN population
7. Improved training and program development for the Title V CSHCN workforce
- 8.
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: AR

APPLICATION YEAR: 2011

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Assistance in planning the training of ADH staff in effective communication of health information (promotion of health literacy)	Practical expertise in Arkansas (and ADH) around health literacy promotion is limited	Health Literacy Missouri
2.	State Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> 6 </u>	Assistance is needed in development of a survey tool that will elicit information that can be translated into meaningful data.	The CSHCN Director developed past survey instruments and the information received was not easily translated into meaningful data.	unknown
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: AR

SP(Reporting Year) # 1

PERFORMANCE MEASURE:

The percent of Arkansas high school students who have engaged in sexual intercourse.

STATUS:

Active

GOAL

Reduce the percentage of students grades 9 through 12 who have engaged in sexual intercourse.

DEFINITION

Percentage.

Numerator:

Number of youth grades nine through twelve engaging in sexual intercourse. Data are weighted and are from the 2007 YRBSS survey. YRBSS is conducted in odd years, so 2008 data are not available. 2008 indicator was populated with results from the 2007 survey.

Denominator:

Percentage is obtained from YRBSS results. Numerator and denominator information is not available.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

2007 YRBS data. Seventy-six percent of select schools agreed to participate in YRBS. Of the students in the sample, 84% or 1,608 were in school the day the survey was given and returned usable questionnaires which could be analyzed.

SIGNIFICANCE

Data from the 2007 Youth Risk Behavior Survey suggests high rates of early sexual involvement for Arkansas children. Results included 54% of Arkansas high school students reported that they had had sexual intercourse. Nine percent reported that they had had sexual intercourse for the first time prior to age 13. Eighteen percent reported having had sexual intercourse with four or more people during their young life.

SP(Reporting Year) # 2

PERFORMANCE MEASURE:

The percentage of children through age 18 and below 200 percent of poverty enrolled in ARKids First child health insurance program.

STATUS:

Active

GOAL

To increase the percentage of children enrolled in ARKids First child health insurance program.

DEFINITION

percentage

Numerator:

The number of children 0 through 18 and below 200 percent of poverty with ARKids First health insurance.

Denominator:

Denominator is number of Arkansas children in families less than 200% of federal poverty level.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

ARKids First, Arkansas Department of Human Services Medicaid Program and US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2008.

SIGNIFICANCE

2008 children in families less than 200% of the federal poverty level reflect information collected in 2007. The proportion of all children through age 18 enrolled in Medicaid also reflects an increase in Medicaid children served.

PERFORMANCE MEASURE:

The percent of pregnant women counseled for HIV testing.

STATUS:

Active

GOAL

Increase the number of pregnant women counseled and ultimately screened for HIV.

DEFINITION

During FY 99 the baseline will be derived from the number of women who respond on the PRAMS survey that they were counseled by their prenatal provider about the need to test their blood for HIV (question 16.1).

Numerator:

Number of respondents of Arkansas PRAMS survey who replied they were counseled by their prenatal provider about the need to test their blood for HIV (Question 20.j) - 24,458. 2007 PRAMS data are reported for 2008 indicator.

Denominator:

Number of respondent of Arkansas PRAMS survey - 36,649. 2007 PRAMS data are reported for 2008 indicator.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

75

DATA SOURCES AND DATA ISSUES

There is currently no statewide data available on HIV counseling or screening. Baseline data will be obtained in FY 1999, from PRAMS survey responses. These will have a confidence interval of +-3. Based on these figures, statewide data will be interpolated. After determining a statewide baseline, a realistic goal will be established.

SIGNIFICANCE

In calendar year 2008, Arkansas had 256 newly reported cases of HIV. 54 (21.1%) of these cases were women. Data is not available concerning how many of these women may have been pregnant. However, 18 babies were reported born to HIV/AIDS positive women in 2008.

SP(Reporting Year) # 4

PERFORMANCE MEASURE:

Percentage of children receiving WIC services who are above the 95th percentile on the National Center for Health Statistic weight for height growth charts.

STATUS:

Active

GOAL

To decrease the percentage of low-income children who are overweight.

DEFINITION

Overweight is defined as the weight for height above the 95th percentile in the National Center for Health Statistics reference population.

Numerator:

The number of children certified for WIC, age 0 to five, above the 95th percentile on the National Center for Health Statistic weight for height growth charts.

Denominator:

The total number of children certified for WIC.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Baseline data source: Pediatric Nutrition Surveillance System.

SIGNIFICANCE

Childhood overweight/obesity, a known precursor to adult obesity, increases the prevalence of obesity-related disorders such as diabetes and heart disease in the population. The causes of childhood overweight/obesity are multifactorial including parental ignorance concerning sound nutritional practices, media promotion of nutritionally harmful products, and decreased incentives and opportunities for physical activity. Given the definition of overweight/obesity in this objective, 5% of healthy children are expected to be above the 95th percentile of weight for height due to normal biological variation. A prevalence of more than 5% for any population subgroup suggests overweight/obesity is a concern for that subgroup.

SP(Reporting Year) # 5

PERFORMANCE MEASURE:

To improve the percent of 14 to 15 year olds on Children's Medical Services (CMS) who state that CMS transition services have helped improve their knowledge and ability to transition into adult life.

STATUS:

Active

GOAL

CMS hopes to improve transition services to youth with disabilities on CMS to help them successfully transition into adulthood.

DEFINITION

percentage

Numerator:

The number of youth ages 14 to 15 (or their parents) who state on the biennial client satisfaction Survey that CMS transition services have helped improve their knowledge and ability to transition into adult life.

Denominator:

The number of 14 to 15 year olds (or their parents) who respond to the biennial CMS client satisfaction survey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The biennial CMS Client Satisfaction Survey is the source of data for this measure. The response rate of the target population to this survey may be a concern if it is not high enough to be statistically significant. 2006 data was supplied with information collected on the CSHCN Transition Survey.

SIGNIFICANCE

This measure should help determine to what degree CMS transition efforts are successful in actually helping all youth on CMS to transition into adulthood.

SP(Reporting Year) # 6

PERFORMANCE MEASURE:

Improve percent of parents responding to the question on Children's Medical Services (CMS) Parent Satisfaction Survey that CMS service coordination teams told them about other services available.

STATUS:

Active

GOAL

CMS hopes to improve care coordination services to all families on CMS so that they will be able to access all needed services.

DEFINITION

Percentage

Numerator:

The number of parents who stated on the CMS Parent Satisfaction Survey that CMS service coordination teams had told them about other services available to them.

Denominator:

The total number of parents responding to the CMS Parent Satisfaction Survey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The biennial CMS Client Satisfaction Survey is the source of data for this measure. The response rate of the target population to this survey may be a concern if it is not high enough to be statistically significant.

SIGNIFICANCE

This measure should help to determine to what degree CMS care coordination services are effective in helping parents of CSHCN to obtain the services they need.

PERFORMANCE MEASURE:

The percent of public school students overweight greater than 95th percentile.

STATUS:

Active

GOAL

Reduce the percentage of overweight children in Arkansas public schools from 22 percent (annual indicator – baseline data 2004) to 15 percent (annual objective).

DEFINITION

In 2007 1,069 (99%) of 1,078 Arkansas schools participated in BMI assessments. Schools submitted BMI assessments for 217,599 (98%) of students enrolled in grades K, 2, 4, 6, 8, and 10 in Arkansas public schools. Among students for whom data was reported, 82% had appropriate data to allow BMI calculation.

Numerator:

Number of Arkansas public school students in grades K, 2, 4, 6, 8 and 10 with a BMI-for-age greater than or equal to 95th percentile - 36,599.

Denominator:

Number of Arkansas public school students for whom BMI was calculated - 178,181.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

19-3

Overweight or obesity in children and adolescents

DATA SOURCES AND DATA ISSUES

Data for 2008 are from Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Five (Fall 2007 - Spring 2008) report. Arkansas BMI Task force, a partnership including Local School Districts, Arkansas Center for Health Improvement, Arkansas Department of Education, Arkansas Department of Health, and UAMS College of Public Health. Baseline BMI Arkansas Public Schools 2004

SIGNIFICANCE

A legislative change, Act 201 of 2007, occurred in 2007 that amended the periodicity of BMI assessments to only include students in even-number grades (K, 2, 4, 6, 8, and 10). Over 60% of adult Arkansans are either overweight (BMI 25-29.9) or obese (BMI > 30). One in four Arkansas high school students is either overweight or at risk for being overweight. Overweight children are more likely to develop childhood diabetes, hypertension and lung problems. Overweight school age children are 50% more likely to become obese adults. Overweight adolescents are 70 - 80% more likely to become obese adults. Life expectancy for obese young adults is 5 - 20 years less than normal weight persons. Obese adults have significantly higher rates of diabetes, heart disease, cancer, stroke, hypertension and arthritis. In 2002, the United States spent an estimated 92.6 billion dollars on illnesses related to obesity.

PERFORMANCE MEASURE:

The percentage of at-risk for overweight children in Arkansas public schools.

STATUS:

Active

GOAL

Reduce the percentage of at-risk for overweight children in Arkansas public schools from 18 percent (annual indicator – baseline data 2004) to 11 percent (annual objective) by 2107.

DEFINITION

In 2007 1,069 (99%) of 1,078 Arkansas schools participated in BMI assessments. Schools submitted BMI assessments for 217,599 (98%) of students enrolled in grades K, 2, 4, 6, 8, and 10 in Arkansas public schools. Among students for whom data was reported, 82% had appropriate data to allow BMI calculation.

Numerator:

Number of Arkansas public school students with a BMI-for-age between 85th and less than 95th percentile - 30,917.

Denominator:

Number of Arkansas public school students for whom BMI was calculated - 178,181.

Units: 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

19.3

Reduce the proportion of children and adolescents who are overweight or obese.

DATA SOURCES AND DATA ISSUES

Data for 2008 are from Arkansas Center for Health Improvement: Assessment of Childhood and Adolescent Obesity in Arkansas, Year Five (Fall 2007 - Spring 2008) report. Arkansas BMI Task Force, a partnership of Local School Districts, Arkansas Center for Health Improvement, Arkansas Department of Education, Arkansas Department of Health and UAMS College of Public Health.

SIGNIFICANCE

A legislative change, Act 201 of 2007, occurred in 2007 that amended the periodicity of BMI assessments to only include students in even-number grades (K, 2, 4, 6, 8, and 10). One in four Arkansas high school students is either overweight or at risk for being overweight. Overweight children are more likely to develop childhood diabetes, hypertension and lung problems. Overweight school age children are 50% more likely to become obese adults. Overweight adolescents are 70 - 80% more likely to become obese adults. Life expectancy for obese young adults is 5 - 20 years less than normal weight persons.

PERFORMANCE MEASURE:

The percent of women smoking during pregnancy.

STATUS:

Active

GOAL

Reduce the percent of Arkansas women smoking during the last three months of pregnancy as reported on Arkansas birth certificates.

DEFINITION

Percent of women with a live birth who reported on birth certificate that they used tobacco during their pregnancy.

Numerator:

Number of women with a live birth in 2008 who reported they smoked during their pregnancy - 6,188.

Denominator:

Number of live births in 2008 - 40489.

Units: 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

27-6,16-10a, and 16-10b

27-6. Increase smoking cessation during pregnancy. Target: 30 percent. Baseline: 14 percent of females aged 18 to 49 years stopped smoking during the first trimester of their pregnancy in 1998. Target setting method: Better than the best. Data source: National Health Interview Survey (NHIS), CDC, NCHS. 16-10. Reduce low birth weight (a-LBW) and very low birth weight (b-VLBW). Target and baseline: a – LBW 5% b – VLBW .9%

DATA SOURCES AND DATA ISSUES

Arkansas Center for Health Statistics - provisional number of live births in 2008.

SIGNIFICANCE

Smoking during pregnancy can result in miscarriages, premature delivery, and sudden infant death syndrome. Preterm birth is associated with a number of modifiable risk factors, including the use of alcohol, tobacco, or other drugs during pregnancy. Smoking accounts for 20 to 30 percent of all LBW births in the United States.

PERFORMANCE MEASURE:

To increase the percentage of ADH Family Planning clients receiving nutritional counseling during an initial or annual visit in the Family Planning clinics.

STATUS:

Active

GOAL

80% of women will receive a measure of their BMI and nutritional counseling during their initial or annual visit.

DEFINITION

BMI - Body Mass Index : kilograms per meter squared.

Numerator:

Number of ADH family planning clients receiving nutritional counseling at their initial or annual family planning visit.

Denominator:

Number of ADH initial or annual family planning visits.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

19-2. Reduce the proportion of adults who are obese.

In adults, obesity is defined as a BMI of 30 kg/m² or more; overweight is a BMI of 25 kg/m² or more. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Health and Nutrition Examination Survey. 1988–94.

DATA SOURCES AND DATA ISSUES

ADH patient encounter system.

SIGNIFICANCE

ADH has launched a major effort, through the Healthy Arkansas Initiative, to reduce obesity in the state. The agency sees more than 79,000 Family Planning patients each year. More than half of adults in the United States are estimated to be overweight or obese. The proportion of adolescents from poor households who are overweight or obese is twice that of adolescents from middle- and high-income households. Obesity is especially prevalent among women with lower incomes and is more common among African American and Mexican American women than among white women. Among African Americans, the proportion of women who are obese is 80 percent higher than the proportion of men who are obese. This gender difference also is seen among Mexican American women and men, but the percentage of white, non-Hispanic women and men who are obese is about the same. Overweight and obesity are major contributors to many preventable causes of death. On average, higher body weights are associated with higher death rates. The number of overweight children, adolescents, and adults has risen over the past four decades.

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: AR

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	26.9	22.3	22.3	23.3	18.1
Numerator	504	430	430	471	365
Denominator	187,377	192,891	192,891	202,070	202,070

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: Hospital Discharge Data System, Health Statistics Branch, ADH and US Census Bureau.

2009 indicator pre-populated with 2008 data, as 2009 Hospital Discharge data is not available.

2. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: Hospital Discharge Data System, Health Statistics Branch, ADH.

2008 indicator pre-populated with 2007 data, as 2008 Hospital Discharge data is not available.

3. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

2007 indicator pre-populated with 2006 data, as 2007 Hospital Discharge data is not available.

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>63.2</u>	<u>75.2</u>	<u>75.5</u>	<u>61.8</u>	<u>84.9</u>
Numerator	<u>15,932</u>	<u>20,544</u>	<u>22,003</u>	<u>19,915</u>	<u>24,251</u>
Denominator	<u>25,225</u>	<u>27,311</u>	<u>29,146</u>	<u>32,205</u>	<u>28,555</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: FY 2009 Medicaid claims.

2. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: FY 2008 Medicaid claims.

Since 2006, through collaboration with the Medicaid Division of the Arkansas Department of Human Services, the ascertainment of numerator and denominator numbers has improved.

3. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: FY 2007 Medicaid claims.

Since 2006, through collaboration with the Medicaid Division of the Arkansas Department of Human Services, the ascertainment of numerator and denominator numbers has improved.

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>8.0</u>	<u>61.4</u>	<u>62.7</u>	<u>17.6</u>	<u>72.3</u>
Numerator	<u>66</u>	<u>522</u>	<u>602</u>	<u>165</u>	<u>579</u>
Denominator	<u>823</u>	<u>850</u>	<u>960</u>	<u>939</u>	<u>801</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: FY 2009 Medicaid claims.

- Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: FY 2008 Medicaid claims

Then number of children less than one year who have received at least one periodic screen in 2008 is difficult to accept based on previous years' data. We are currently attempting to communicate with the Medicaid Program to ask about double checking this number or providing an explanation of why the number is so much lower than previous years' numbers. As of this date, we have not been able to obtain this information.

- Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: FY 2007 Medicaid claims

Since 2006, through collaboration with the Medicaid Division of the Arkansas Department of Human Services, the ascertainment of numerator and denominator numbers has improved.

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	79.0	79.1	81.0	80.3	80.6
Numerator	30,755	31,697	33,425	32,969	31,555
Denominator	38,937	40,061	41,248	41,046	39,150
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: Birth Certificate Data, Health Statistics Branch, ADH

These data are reported for October 1, 2008 through September 30, 2009.

2. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: Health Statistics Branch, ADH

These data are reported for October 1, 2007 through September 30, 2008.

3. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: Health Statistics Branch, ADH

These data are reported for October 1, 2006 through September 30, 2007.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	2005	2006	Annual Indicator Data		
			2007	2008	2009
Annual Indicator	<u>98.5</u>	<u>85.0</u>	<u>97.2</u>	<u>97.2</u>	<u>93.4</u>
Numerator	<u>450,332</u>	<u>345,512</u>	<u>464,845</u>	<u>464,845</u>	<u>453,397</u>
Denominator	<u>457,214</u>	<u>406,494</u>	<u>478,052</u>	<u>478,052</u>	<u>485,331</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes**1. Section Number:** Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data source: FY 2009 Medicaid claims.

2. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 indicator is prepopulated with 2007 data due to inability to obtain this information from the Medicaid Program.

3. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 rate is percent of Medicaid enrollees who have received a service paid for by the Medicaid Program.

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	42.7	43.6	46.5	38.8	59.3
Numerator	38,842	34,517	37,557	47,915	50,004
Denominator	90,958	79,094	80,681	123,588	84,283

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes**1. Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: FY 2009 Medicaid claims.

2. Section Number: Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: FY 2008 Medicaid claims.

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>40.5</u>	<u>44.7</u>	<u>51.1</u>	<u>36.8</u>	<u>32.2</u>
Numerator	<u>7,427</u>	<u>8,658</u>	<u>10,066</u>	<u>7,410</u>	<u>7,752</u>
Denominator	<u>18,344</u>	<u>19,382</u>	<u>19,714</u>	<u>20,143</u>	<u>24,074</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2008

Field Note:

There has been a readjustment downward in the numerator to levels similar to 2004 and 2005. Cases are placed in an inactive status if there is no response from the family after repeated contacts in an attempt to better reflect current activity.

- Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data: renewal of relationships with families of CSHCN covered by SSI has led to an increase in this indicator in the past 2 years.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: AR

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2008	Matching data files	<u>10</u>	<u>7.2</u>	<u>8.9</u>
b) <i>Infant deaths per 1,000 live births</i>	2008	Matching data files	<u>7.1</u>	<u>4.4</u>	<u>5.9</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2008	Matching data files	<u>69.7</u>	<u>89.4</u>	<u>78</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2008	Matching data files	<u>71.9</u>	<u>77.7</u>	<u>74.4</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: AR

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2009	<div style="text-align: right;">133</div>
b) <i>Medicaid Children</i> (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">1</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">4</div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">5</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">9</div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">10</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">18</div>)	2009	<div style="text-align: right;">133</div> <div style="text-align: right;">100</div> <div style="text-align: right;">100</div>
c) <i>Pregnant Women</i>	2009	<div style="text-align: right;">200</div>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: AR

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2009	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>4</u>) (Age range <u>5</u> to <u>9</u>) (Age range <u>10</u> to <u>18</u>)	2009	<u>200</u> <u>200</u> <u>200</u>
c) <i>Pregnant Women</i>	2009	<u>200</u>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

1. **Section Number:** Form18_Indicator 05
Field Name: LowBirthWeight
Row Name: Percent of ow birth weight (<2,500 grams)
Column Name:
Year: 2011
Field Note:
Data source: Provisional 2008 linked Birth/Hospital Discharge Data System file.
2. **Section Number:** Form18_Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2011
Field Note:
Data source: Provisional 2008 linked Birth/Infant Death/Hospital Discharge Data System file.
3. **Section Number:** Form18_Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2011
Field Note:
Data source: Provisional 2008 linked Birth/Hospital Discharge Data System file.
4. **Section Number:** Form18_Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2011
Field Note:
Data source: Provisional 2008 linked Birth/Hospital Discharge Data System file.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: AR

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	No
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: AR

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other: Youth Tobacco Survey	3	Yes

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: AR

Form Level Notes for Form 20

None

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2005	2006	2007	2008	2009
Annual Indicator	9.1	9.1	9.5	9.2	9.0
Numerator	3,546	3,667	3,945	3,788	3,551
Denominator	39,101	40,203	41,380	41,168	39,261

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: 2009 birth certificate data for fiscal year 2009 - October 1, 2008 through September 30, 2009.

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: 2008 birth certificate data for fiscal year 2008 - October 1, 2007 through September 30, 2008.

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: 2007 birth certificate data for fiscal year 2007 - October 1, 2006 through September 30, 2007.

The sharp increase in low birth weight rate for Arkansas is clearly noted. We are studying this phenomenon. It appears that the largest increases have occurred among the higher birth weight portion of this group - 2000 to 2500 grams. This is also reflected in increases in the percentage of all births that occur late preterm - 34-37 weeks. These findings need assessment in detail. Some questions we are looking into: are we inducing labor or performing c-sections too early?

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>7.4</u>	<u>7.5</u>	<u>7.8</u>	<u>7.4</u>	<u>7.3</u>
Numerator	<u>2,811</u>	<u>2,907</u>	<u>3,109</u>	<u>2,951</u>	<u>2,776</u>
Denominator	<u>37,914</u>	<u>38,971</u>	<u>40,063</u>	<u>39,858</u>	<u>38,076</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data source: 2009 birth certificate data for fiscal year 2009 - October 1, 2008 through September 30, 2009.

2. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data source: 2008 birth certificate data for fiscal year 2008 - October 1, 2007 through September 30, 2008.

3. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data source: 2007 birth certificate data for fiscal year 2007 - October 1, 2006 through September 30, 2007.

It is clear that the phenomenon of increases in low weight births can not be explained by multiples and assisted reproductive therapy alone. We also notice an increase in late preterm births. Please see comments under the total low birth weight rate measure.

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>1.7</u>	<u>1.8</u>	<u>1.8</u>	<u>1.7</u>	<u>1.7</u>
Numerator	<u>678</u>	<u>726</u>	<u>762</u>	<u>698</u>	<u>662</u>
Denominator	<u>39,101</u>	<u>40,203</u>	<u>41,380</u>	<u>41,168</u>	<u>39,261</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: 2009 birth certificate data for fiscal year 2009 - October 1, 2008 through September 30, 2009.

2. **Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: 2008 birth certificate data for fiscal year 2008 - October 1, 2007 through September 30, 2008.

3. **Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: 2007 birth certificate data for fiscal year 2007 - October 1, 2006 through September 30, 2007.

The increase in births below 1500 grams is also noted and is of great concern. We need to look also at the percentage of births at a gestational age of 32 weeks to see if that parallels the birth weight trend. These analyses will be made carefully over the next few months to clarify our developing needs.

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>1.4</u>	<u>1.4</u>	<u>1.4</u>	<u>1.3</u>	<u>1.3</u>
Numerator	<u>520</u>	<u>563</u>	<u>573</u>	<u>537</u>	<u>506</u>
Denominator	<u>37,914</u>	<u>38,971</u>	<u>40,063</u>	<u>39,858</u>	<u>38,076</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: 2009 birth certificate data for fiscal year 2009 - October 1, 2008 through September 30, 2009.

2. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: 2008 birth certificate data for fiscal year 2008 - October 1, 2007 through September 30, 2008.

3. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2007

Field Note:

The trend for very low birth weight among singleton births seems pretty flat. Thus it seems that our increases in low birth weight rates are impacted more by moderately LBW infants and late preterm births. We are investigating this finding.

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	16.5	13.2	11.4	10.3	8.2
Numerator	92	75	66	60	48
Denominator	557,472	569,943	579,442	583,073	583,073

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. Section Number: Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2009

Field Note:

2008 population estimate 0 - 14 years used for 2009 rate

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. Section Number: Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2008

Field Note:

2007 population estimate 0 - 14 years used for 2008 rate

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

If, however, this rate is accurate, then the apparent decline in death rates in the past two years to children under 14 is gratifying. Certainly a great deal more public emphasis at community level has been brought to bear through programmatic efforts around seat belt use and fire burn prevention. We need to assess future numbers to see if this dramatic drop holds up. It may be a "bounce," and not reflect a true trend.

3. Section Number: Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2007.

If, however, this rate is accurate, then the apparent decline in death rates to children under 14 is gratifying. Certainly a great deal more public emphasis at community level has been brought to bear through programmatic efforts around seat belt use and fire burn prevention. We need to assess future numbers to see if this dramatic drop holds up. It may be a one-year "bounce."

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>5.7</u>	<u>7.5</u>	<u>5.7</u>	<u>3.9</u>	<u>3.3</u>
Numerator	<u>32</u>	<u>43</u>	<u>33</u>	<u>23</u>	<u>19</u>
Denominator	<u>557,472</u>	<u>569,943</u>	<u>579,442</u>	<u>583,073</u>	<u>583,073</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2009

Field Note:

2008 population estimate 0 - 14 years used for 2009 rate

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. Section Number: Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2008

Field Note:

2007 population estimate 0 - 14 years used for 2008 rate.

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

However, if this rate is accurate, the fact that this trend is showing a sharp drop in deaths due to motor vehicle crashes goes along with new public emphasis on seat belt use, and among new awareness of all terrain vehicle dangers. This pattern goes along with programmatic efforts.

3. Section Number: Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2007.

However, if this rate is accurate, the fact that this trend is showing a sharp drop in deaths due to motor vehicle crashes goes along with new public emphasis on seat belt use, and among new awareness of all terrain vehicle dangers. This pattern goes along with programmatic efforts.

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>44.8</u>	<u>49.2</u>	<u>46.8</u>	<u>37.0</u>	<u>21.6</u>
Numerator	<u>178</u>	<u>191</u>	<u>180</u>	<u>142</u>	<u>83</u>
Denominator	<u>397,584</u>	<u>388,023</u>	<u>384,967</u>	<u>383,568</u>	<u>383,568</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. Section Number: Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2009

Field Note:

2008 population estimate 0 - 14 years used for 2009 rate

The 2009 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2009.

2. Section Number: Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2008

Field Note:

2007 population estimate 0 - 14 years used for 2008 rate.

The 2008 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2008.

However, if this rate is accurate and although we need to update our denominator data, the numbers of death to youth 15-24 seem to be sharply down, again showing agreement with the experience of children under 15. Population-wide public awareness messages could well impact both age groups.

3. Section Number: Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

The 2007 data are lacking deaths that occurred to Arkansas residents in other states. Interstate exchange agreements between states guarantee death certificates to Arkansas from other states, but the process may be prolonged.

In addition, death certificates may be delayed due to causes of deaths pending by County Coroners or the medical examiner.

These two circumstances above may ultimately result in a higher mortality rate than is reported for 2007.

However, if this rate is accurate, the numbers of death to youth 15-24 seem to be sharply down, again showing agreement with the experience of children under 15. Population-wide public awareness messages could well impact both age groups.

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>367.4</u>	<u>372.8</u>	<u>366.7</u>	<u>349.9</u>	<u>329.6</u>
Numerator	<u>2,048</u>	<u>2,125</u>	<u>2,125</u>	<u>2,040</u>	<u>1,922</u>
Denominator	<u>557,472</u>	<u>569,943</u>	<u>579,442</u>	<u>583,073</u>	<u>583,073</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04A**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data source: 2008 Hospital Discharge Data System and 2008 population estimates less than 14 years.

2008 is latest available data.

2. Section Number: Form20_Health Status Indicator #04A**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data source: 2007 Hospital Discharge Data System and 2007 population estimates less than 14 years.

2007 is latest available.

3. Section Number: Form20_Health Status Indicator #04A**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data source: 2006 Hospital Discharge Data System and 2006 population estimates less than 14 years.

2006 is latest available. We will make no other comment on this trend.

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>61.7</u>	<u>57.9</u>	<u>57.0</u>	<u>55.4</u>	<u>47.7</u>
Numerator	<u>344</u>	<u>330</u>	<u>330</u>	<u>323</u>	<u>278</u>
Denominator	<u>557,472</u>	<u>569,943</u>	<u>579,442</u>	<u>583,073</u>	<u>583,073</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: 2008 Hospital Discharge Data System and 2008 population estimates less than 14 years.

2008 is latest available data.

2. Section Number: Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: 2007 Hospital Discharge Data System and 2007 population estimates less than 14 years.

2007 data are the latest available.

3. Section Number: Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: 2006 Hospital Discharge Data System and 2006 population estimates less than 14 years.

2006 data are the latest available.

We will withhold comment until later data become available.

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>155.7</u>	<u>156.4</u>	<u>157.7</u>	<u>153.8</u>	<u>134.3</u>
Numerator	<u>619</u>	<u>607</u>	<u>607</u>	<u>590</u>	<u>515</u>
Denominator	<u>397,584</u>	<u>388,023</u>	<u>384,967</u>	<u>383,568</u>	<u>383,568</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: 2008 Hospital Discharge Data System and 2008 population estimates less than 14 years.

2008 is latest available data.

2. Section Number: Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: 2007 Hospital Discharge Data System and 2007 population estimates 15-24 years.

2007 are the latest available.

3. Section Number: Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

Data source: 2006 Hospital Discharge Data System and 2006 population estimates 15-24 years.

2006 are the latest available.

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>31.0</u>	<u>30.2</u>	<u>34.3</u>	<u>46.5</u>	<u>47.6</u>
Numerator	<u>2,961</u>	<u>2,879</u>	<u>3,299</u>	<u>4,471</u>	<u>4,570</u>
Denominator	<u>95,546</u>	<u>95,410</u>	<u>96,115</u>	<u>96,050</u>	<u>96,050</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Form20_Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2009
Field Note:
 2008 population estimate of female population 15-19 years used for 2009 indicator.
- Section Number:** Form20_Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2008
Field Note:
 2007 population estimate of female population 15-19 years used for 2008 indicator.
- Section Number:** Form20_Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2007
Field Note:
 2006 population estimate of female population 15-19 years used for 2007 indicator.

Even though the population denominator has not been updated, our concern for the steady rise in chlamydia positivity among tested young women is of very great concern. At the moment we lack a clearly proven methodology to address this trend. We will bring new emphasis to treating partners by sending medications home with the women who have positive tests. So far, we have not seen results on a special project in Washington DC in which an Internet page was used to enhance public awareness and offered a way to send in specimens for testing.

While ADH is now using the more sensitive method of urine specimen testing to test for Chlamydia, this should not fully explain the observed increase in the rate among young women in Arkansas.

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>7.6</u>	<u>7.4</u>	<u>9.3</u>	<u>12.6</u>	<u>12.5</u>
Numerator	<u>3,596</u>	<u>3,502</u>	<u>4,385</u>	<u>5,873</u>	<u>5,856</u>
Denominator	<u>471,518</u>	<u>471,606</u>	<u>469,950</u>	<u>467,864</u>	<u>467,864</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2009

Field Note:

2008 population estimate of female population 15-19 years used for 2009 indicator.

2. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2008

Field Note:

2007 population estimate of female population 20-44 years used for 2008 indicator.

3. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2007

Field Note:

2006 population estimate of female population 20-44 years used for 2007 indicator.

Like younger women, those over 20 are also showing remarkable increases in chlamydia positivity. We are doing more urine testing, which may be more sensitive, but should not fully explain the observed increase in the rate among women in Arkansas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	41,509	31,259	9,024	581	645	0	0	0
Children 1 through 4	160,561	124,309	31,116	2,270	2,866	0	0	0
Children 5 through 9	191,557	147,810	38,259	2,571	2,917	0	0	0
Children 10 through 14	189,446	145,295	39,661	1,929	2,561	0	0	0
Children 15 through 19	197,229	150,253	42,714	1,990	2,272	0	0	0
Children 20 through 24	186,339	143,353	38,866	1,952	2,168	0	0	0
Children 0 through 24	966,641	742,279	199,640	11,293	13,429	0	0	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	36,627	4,882	0
Children 1 through 4	141,357	19,204	0
Children 5 through 9	172,730	18,827	0
Children 10 through 14	174,721	14,725	0
Children 15 through 19	185,324	11,905	0
Children 20 through 24	175,179	11,160	0
Children 0 through 24	885,938	80,703	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	76	37	35	1	0	0	0	3
Women 15 through 17	1,612	943	570	7	1	6	0	85
Women 18 through 19	3,886	2,661	1,038	15	1	12	0	159
Women 20 through 34	29,588	22,175	5,263	114	98	356	0	1,582
Women 35 or older	2,867	2,218	354	11	22	68	0	194
Women of all ages	38,029	28,034	7,260	148	122	442	0	2,023

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	70	5	1
Women 15 through 17	1,411	191	10
Women 18 through 19	3,550	317	19
Women 20 through 34	26,379	3,137	72
Women 35 or older	2,436	420	11
Women of all ages	33,846	4,070	113

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	270	153	79	0	4	1	4	29
Children 1 through 4	55	42	7	0	0	0	0	6
Children 5 through 9	27	17	9	0	0	0	0	1
Children 10 through 14	40	29	9	0	0	1	0	1
Children 15 through 19	127	85	33	0	0	1	0	8
Children 20 through 24	217	134	58	1	1	2	2	19
Children 0 through 24	736	460	195	1	5	5	6	64

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	231	21	18
Children 1 through 4	48	3	4
Children 5 through 9	25	1	1
Children 10 through 14	39	0	1
Children 15 through 19	117	4	6
Children 20 through 24	191	16	10
Children 0 through 24	651	45	40

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	780,302	598,926	160,774	9,341	11,261	0	0	0	2009
Percent in household headed by single parent	14.8	11.1	24.3	4.6	4.6	0.0	0.0	0.0	2009
Percent in TANF (Grant) families	1.6	1.1	3.3	0.6	0.2	0.0	0.0	0.0	2009
Number enrolled in Medicaid	414,104	185,940	88,302	761	1,228	0	0	137,873	2009
Number enrolled in SCHIP	98,202	61,141	17,222	190	505	0	0	19,144	2009
Number living in foster home care	9,299	4,601	2,105	42	21	0	0	2,530	2009
Number enrolled in food stamp program	91,304	52,293	30,124	379	285	418	495	7,310	2009
Number enrolled in WIC	81,248	56,695	20,379	541	575	545	2,513	0	2009
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2009
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2009

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	710,759	69,543	0	2009
Percent in household headed by single parent	12.4	11.9	0.0	2009
Percent in TANF (Grant) families	1.6	0.3	0.0	2009
Number enrolled in Medicaid	388,171	25,933	0	2009
Number enrolled in SCHIP	90,287	7,915	0	2009
Number living in foster home care	9,093	206	0	2009
Number enrolled in food stamp program	73,069	6,988	11,247	2009
Number enrolled in WIC	68,075	13,173	0	2009
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	2009
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	0.0	2009

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	<u>0</u>
Living in urban areas	<u>466,649</u>
Living in rural areas	<u>313,653</u>
Living in frontier areas	<u>0</u>
Total - all children 0 through 19	<u>780,302</u>

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	2,822,138.0
Percent Below: 50% of poverty	5.8
100% of poverty	15.3
200% of poverty	40.2

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AR

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	<u>773,598.0</u>
Percent Below: 50% of poverty	<u>9.7</u>
100% of poverty	<u>21.1</u>
200% of poverty	<u>51.4</u>

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_Children

Row Name: All children 0 through 19

Column Name:

Year: 2011

Field Note:

Data source: US Census Bureau.

2. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

There were 246 native Hawaiian/Other Pacific Islander families, 524 families with more than one race reported and 8,739 other/unknown families in households headed by single parent . However, we did not have a population estimate for these race categories. Thus we could not determine the percent in household headed by single parent for in these race categories.

3. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_TANFPercent

Row Name: Percent in TANF (Grant) families

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

There were 9 native Hawaiian/Other Pacific Islander, 59 with more than one race reported and 259 other/unknown in TANF Grant families . However, we did not have a population estimate for these race categories. Thus we could not determine the percent in TANF Grant families for in these race categories.

4. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_MedicaidNo

Row Name: Number enrolled in Medicaid

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

5. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_SCHIPNo

Row Name: Number enrolled in SCHIP

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

6. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

7. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_WICNo

Row Name: Number enrolled in WIC

Column Name:

Year: 2011

Field Note:

Data source: WIC Program, Arkansas Department of Health.

8. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_JuvenileCrimeRate

Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name:

Year: 2011

Field Note:

These data were not available. The agency, Arkansas Crime Information Center, who is responsible for the data, was not able to break out juvenile crime arrests from total arrests by race and ethnicity. They are currently working on a new data software system that will make these data available in the the future.

9. **Section Number:** Form21_Indicator 09A

Field Name: HSIRace_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2011

Field Note:

These data were unavailable.

10. **Section Number:** Form21_Indicator 09B

Field Name: HSIEthnicity_Children

Row Name: All children 0 through 19

Column Name:

Year: 2011

Field Note:

Data source: US Census Bureau.

11. **Section Number:** Form21_Indicator 09B

Field Name: HSIEthnicity_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

There were 18,915 families in households headed by single parent with ethnicity unknown. However, we did not have a population estimate for unknown ethnicity. Thus we could not determine the percent in household headed by single parent for those with ethnicity not reported.

12. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_TANFPercent

Row Name: Percent in TANF (Grant) families

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

There were 1,100 TANF Grant families in with ethnicity unknown. However, we did not have a population estimate for unknown ethnicity. Thus we could not determine the percent in TANF Grant families for those with ethnicity not reported.

13. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_MedicaidNo

Row Name: Number enrolled in Medicaid

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

14. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_SCHIPNo

Row Name: Number enrolled in SCHIP

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

15. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

16. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_WICNo

Row Name: Number enrolled in WIC

Column Name:

Year: 2011

Field Note:

Data source: WIC Program, Arkansas Department of Health.

17. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_JuvenileCrimeRate

Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name:

Year: 2011

Field Note:

These data were not available. The agency, Arkansas Crime Information Center, who is responsible for the data, was not able to break out juvenile crime arrests from total arrests by race and ethnicity. They are currently working on a new data software system that will make these data available in the the future.

18. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2011

Field Note:

These data were unavailable.

19. Section Number: Form21_Indicator 11

Field Name: S11_total

Row Name: Total Population

Column Name:

Year: 2011

Field Note:

2009 Total Population populated with 2008 population estimates.

Data source: 2008 Intercensal estimates, National Center for Health Statistics.

20. Section Number: Form21_Indicator 11

Field Name: S11_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

21. Section Number: Form21_Indicator 11

Field Name: S11_100percent

Row Name: 100% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

22. Section Number: Form21_Indicator 11

Field Name: S11_200percent

Row Name: 200% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

23. Section Number: Form21_Indicator 12

Field Name: S12_Children

Row Name: Children 0 through 19 years old

Column Name:

Year: 2011

Field Note:

2009 Total Population populated with 2008 population estimates.

Data source: 2008 Intercensal estimates, National Center for Health Statistics.

24. Section Number: Form21_Indicator 12

Field Name: S12_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

25. Section Number: Form21_Indicator 12

Field Name: S12_100percent

Row Name: 100% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

26. Section Number: Form21_Indicator 12

Field Name: S12_200percent

Row Name: 200% of poverty

Column Name:

Year: 2011

Field Note:

2009 poverty indicator is populated with 2008 data.

Data source: US Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2009.

27. Section Number: Form21_Indicator 09A

Field Name: HSIRace_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

28. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2011

Field Note:

Data source: Arkansas Department of Human Services.

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Rate of births per 1,000 for teenagers aged 18 through 19 years.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	<input type="text"/>				
Is the Data Provisional or Final?	<input type="text"/>				

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 2 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of women aged 18-44 years who report being current smokers.

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 3 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Proportion of children aged 0-21 years with Injury Severity Score (ISS) of greater than 15 who receive definitive treatment in a Level I or Level II trauma center.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 4 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of people on community water systems whose water is appropriately fluoridated.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.				
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 5 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of school-aged children with body mass index greater than the 85th percentile.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 6 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of respondents indicating Title V CSHCN program personnel have communicated information on one or more program(s) or service(s)

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the Data Provisional or Final?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 7 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of CSHCN care coordination staff expressing unmet needs related to workforce development and/or training

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: AR

Form Level Notes for Form 12

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: AR

SP(New for Needs Assessment cycle 2011-2015) # 1

PERFORMANCE MEASURE:	Rate of births per 1,000 for teenagers aged 18 through 19 years.
STATUS:	Active
GOAL	Reduce the rate of births to teenagers aged 18-19 years.
DEFINITION	<p>Number of births to teenagers aged 18-19 years divided by population estimate of teenagers age 18-19 years multiplied by 1,000</p> <p>Numerator: Number of births to Arkansas teenagers aged 18-19 years.</p> <p>Denominator: Population estimates of Arkansas youth aged 18-19 years.</p> <p>Units: 1000 Text: Rate</p>
HEALTHY PEOPLE 2010 OBJECTIVE	9-7 Reduce pregnancies among adolescent females
DATA SOURCES AND DATA ISSUES	Data sources are: Birth certificates to Arkansas residents aged 18-19 year, Health Statistics Branch, Arkansas Department of Health; Population estimates of Arkansas residents aged 18-19 years, US Census Bureau.
SIGNIFICANCE	The rate of births to this subgroup of teenagers is typically much higher than the rate of births to teenagers aged 15-17 years. Arkansas has one of the highest rates of births to teenagers, especially 18-19 year olds. Abortion rates are low, so primary prevention of pregnancy is the most viable means of reducing birth rates.

PERFORMANCE MEASURE:	Percentage of women aged 18-44 years who report being current smokers.
STATUS:	Active
GOAL	To reduce the percentage of women of reproductive age who are current smokers.
DEFINITION	<p>Number women 18-44 years who responded on BRFSS that they are currently smoking divided by number of women 18-44 years who responded to BRFSS multiplied by 100.</p> <p>Numerator: Number of women 18-44 years who responded on BRFSS that they are currently smoking.</p> <p>Denominator: Number of women 18-44 years who responded to BRFSS.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	27-1 Reduce tobacco use by adults (also 27-6 Increase smoking cessation during pregnancy)
DATA SOURCES AND DATA ISSUES	Arkansas Behavioral Risk Factor Surveillance System, Health Statistics Branch, Arkansas Department of Health. Although women 15-44 years are typically considered the defining range for "reproductive age, the BRFSS only includes those 18 and older. This is the reason the age range of 18-44 years were chosen for this measure. Data are weighted to represent Arkansas female population 18-44 years of age.
SIGNIFICANCE	While reduction of smoking during pregnancy has always been a priority for Arkansas, it is important to broaden the scope to encompass concern for the interconceptional and pre-conceptional periods in women's lives. Arkansas has high rates of smoking-related mortality among women. In fact, according to an analysis published in MMWR in December 2009, compared to other states Arkansas had the eighth highest rate of smoking-attributable mortality among females during 2000-2004. Smoking profoundly affects not only women but also the children around them. The detrimental effects of secondhand smoke on children are myriad.

PERFORMANCE MEASURE:	Proportion of children aged 0-21 years with Injury Severity Score (ISS) of greater than 15 who receive definitive treatment in a Level I or Level II trauma center.
STATUS:	Active
GOAL	Increase number of children with severe injuries that are appropriately triaged and dispatched to higher level care facilities.
DEFINITION	<p>Number of children aged 0-21 years with Injury Severity Score (ISS) greater than 15 who receive treatment in a Level I or Level II trauma center divided by all children aged 0-21 years with ISS greater than 15 multiplied by 100.</p> <p>Numerator: Number of children aged 0-21 years with Injury Severity Score (ISS) greater than 15 who receive treatment in a Level I or Level II trauma center.</p> <p>Denominator: Number of all children aged 0-21 years with Injury Severity Score (ISS) greater than 15.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	1-13 Increase the number of Tribes, States and the District of Columbia with trauma care systems
DATA SOURCES AND DATA ISSUES	Data source: Arkansas Trauma Registry, Injury Prevention and Control Branch, Center for Public Health Protection, Arkansas Department of Health.
SIGNIFICANCE	<p>The Injury Severity Score (ISS) is calculated using the Abbreviated Injury Scale (AIS) assigned in the field and is a useful indicator of the severity of injury. The AIS is utilized for most children with more severe injuries and is information that will be collected through the state Trauma Registry housed within the Arkansas Department of Health. As the trauma system unfolds, more children with severe injuries should be appropriately triaged and dispatched to higher level care facilities. Thus this performance measure should serve as a reasonable indicator for how trauma system development is progressing with respect to childhood injuries.</p>

PERFORMANCE MEASURE:	Percentage of people on community water systems whose water is appropriately fluoridated.
STATUS:	Active
GOAL	Increase the percentage of Arkansas residents on community water systems whose water is appropriately fluoridated.
DEFINITION	<p>Number of people on community water systems whose water is appropriately fluoridated divided by number of all people on community water systems multiplied by 100.</p> <p>Numerator: Number of Arkansas residents on community water systems whose water is appropriately fluoridated.</p> <p>Denominator: Number of all Arkansas residents on community water systems.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	21-9 Increase the proportion of the U.S. population served by community water systems with optimally
DATA SOURCES AND DATA ISSUES	Office of Oral Health, Arkansas Department of Health.
SIGNIFICANCE	Currently 65% of Arkansans receive water from systems with recommended levels of fluoride. Legislation to mandate fluoridation of all public water systems has been drafted and introduced several times but to date has not passed. In the meantime, the Office of Oral Health has worked with individual systems to raise awareness and support for fluoridation, adding a number to the ranks of the voluntarily "fluoridated" over the past ten years. Oral health in Arkansas has been a continuing challenge for many years due to lack of and maldistribution of providers and a relative lack of fluoridated water supplies. Children in the state suffer more dental decay than in many states.

PERFORMANCE MEASURE:	Percentage of school-aged children with body mass index greater than the 85th percentile.
STATUS:	Active
GOAL	Decrease the percentage of school-aged children with body mass index greater than 85th percentile.
DEFINITION	<p>Number of Arkansas public school students in grades K, 2, 4, 6, 8, and 10 with a BMI greater than 85th percentile divided by number of Arkansas public school students for which BMI is measured multiplied by 100.</p> <p>Numerator: Number of Arkansas public school students in grades K, 2, 4, 6, 8, and 10 with a BMI greater than 85th percentile.</p> <p>Denominator: Number of Arkansas public school students in grades K, 2, 4, 6, 8 and 10 for which BMI is measured</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	19-3 Reduce the proportion of children and adolescents who are overweight or obese Overweight or obesity in children and adolescents.
DATA SOURCES AND DATA ISSUES	Data source: Assessment of Childhood and Adolescent Obesity in Arkansas annual report, Arkansas Center for Health Improvement.
SIGNIFICANCE	Act 1220 of 2003 mandated universal screening of children K-12 for body mass index with letters home to parents expressing the readings and appropriate health recommendations. Act 201 of 2007 amended the periodicity of BMI assessments to include students in grades K, 2, 6, 8, and 10. Rates of overweight/obesity among Arkansas children have not declined significantly the past six years, but they have leveled off and evidence of decline is anticipated shortly. Still, almost 38% of school children in the state are obese or overweight, and given the intense ongoing activity in this arena, continued focus is clearly warranted.

PERFORMANCE MEASURE:	Percentage of respondents indicating Title V CSHCN program personnel have communicated information on one or more program(s) or service(s)
STATUS:	Active
GOAL	Increased number of respondents stating that Title V CSHCN staff members have provided information on resources or services that were beneficial to their CSHCN and/or family.
DEFINITION	<p>Improved communication between the Title V CSHCN program and the CSHCN population providing information on resources and services available to assist families of CSHCN.</p> <p>Numerator: Unduplicated number of respondents answering "Yes" to a question or statement similar to "Title V CSHCN staff members have communicated information during the previous year on one or more programs or services that was helpful in meeting a family or individual need.</p> <p>Denominator: Total number of annual surveys received</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>16-23 Increase the proportion of Territories and States that have service systems for CSHCN</p> <p>Improved communication between Title V CSHCN staff and other communication tools provides information, as it becomes available, and enables families to access funding or services that prove helpful to the family.</p>
DATA SOURCES AND DATA ISSUES	Annual Title V CSHCN survey to be mailed to active consumers in Title V CSHCN status A, J, X, and K.
SIGNIFICANCE	<p>Families indicated during focus groups and on the annual survey that they have a tremendous need for information.</p> <p>Members of the Focus Groups were dissatisfied that information on programs and services was not readily available to them in this age of instant access.</p>

PERFORMANCE MEASURE:	Percentage of CSHCN care coordination staff expressing unmet needs related to workforce development and/or training
STATUS:	Active
GOAL	Decreased percentage of Title V CSHCN care coordination staff expressing unmet training needs on an annual survey.
DEFINITION	<p>Improved intra-program communication, training and job resource information for Title V CSHCN care coordination workforce will enable staff to provide beneficial information to the families of CSHCN.</p> <p>Numerator: Number of Title V CSHCN care coordination staff responding "Yes" indicating an unmet need related to workforce development or training.</p> <p>Denominator: Total number of Title V CSHCN care coordination staff surveyed</p> <p>Units: 100 Text: Percent</p>

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES	An annual survey of CSHCN staff with questions targeting the measure. Assistance from Departmental and other experts on survey development will be required. This measure should show a decreasing percentage over subsequent years.
SIGNIFICANCE	The Employee Focus Group expressed disappointment in the training resources available to them as they strive to serve the CSHCN community. In addition, new programs developed within short time constraints proved problematic and made it especially difficult for care coordination staff to manage and provide adequate and correct information to the CSHCN community. Workforce development and empowerment are essential to the quality of services provided to the CSHCN community. By improving the training and tools available to the CSHCN care coordination staff, the services provided to the CSHCN community will improve as well.

